

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

0115840
1 7

US EPA RECORDS CENTER REGION 5

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

Authorization Number 9 9 7 0 1 6
8 13



460637

National Lacquer & Paint Co. 7415 S. Green Street
(Company Name) Address

0 3 1 6 0 0 0 2 8 3 G
14 Generator Number 24

Chicago City Illinois State 60621 Zip

EPA I.D. # ILD005144837

WASTE HAULER(S)

(1) National Lacquer & Paint Co. 7415 S. Green Street
Hauler Name Hauler Address

S.W.H. Registration Number 0 6 0 1 0 0 1
25 31

(2) _____
Hauler Name Hauler Address

S.W.H. Registration Number _____
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 S. Colfax Avenue
(Facility Name) Address

9 1 8 0 8 9 0 2
39 Site Number 46

Griffith City Indiana State 46319 Zip

E.P.A. I.D. # IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Compound, lacquer, paint, or varnish
removing, reducing, or thinning liquid

K078

NA#1142

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-1-82

Berry H.
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0 0 1 4 8 5
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

27-55
DRUMS

TANK TRUCK

OPEN TRUCK

OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

Flord Kiffin
(Authorized Signature)

DATE: 02/01/82
34 59

(2) _____
(Authorized Signature)

DATE: _____

E P A I D # ILD005144837

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

R. P. M. J.
(Authorized Signature)

DATE: 02/01/82
35 59

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

* 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

On dock 2/1/82 6PM
To 126R T-63 6AM 2/12/82

003619

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115841
7

Authorization Number 9 9 7 0 1 6
8 13

National Lacquer & Paint Co. 7415 S. Green Street
(Company Name) Address

Chicago Illinois 60621
City State Zip

0 3 1 6 0 0 0 2 8 3 G
14 Generator Number 24

EPA I.D. # ILD005144837

WASTE HAULER(S)

(1) National Lacquer & Paint Co. 7415 S. Green Street
Hauler Name Hauler Address

S.W.H. Registration Number 0 6 0 1 0 0 1
25 31

(2) _____
Hauler Name Hauler Address

S.W.H. Registration Number _____
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 S. Colfax Avenue
(Facility Name) Address

Griffith Indiana 46319
City State Zip

9 1 8 0 8 9 0 2
39 Site Number 46

E.P.A. I.D. # IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Compound, lacquer, paint, or varnish
removing, reducing, or thinning liquid

K078

NA#1142

E.P.A. HW# F-003

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-19-82

Berry Hill
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0 0 1 4 3 0

1 GALLONS (Circle One)
2 CU. YDS. 1
52

METHOD OF SHIPMENT: (Circle One) 26 TANK TRUCK OPEN TRUCK OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

Flora Hill
(Authorized Signature)

DATE: 04 / 19 / 82
54 59

(2) _____
(Authorized Signature)

DATE: ____ / ____ / ____

E.P.A. I.D. # ILD005144837

DISPOSAL, STORAGE, OR TREATMENT FACILITY

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[Signature]
(Authorized Signature)

DATE: 4-19-82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

On dock 4-19-82 GRM
TO 124 RT-63 GRM 5-5-82 003620

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115842
7

Authorization Number 9 9 7 0 1 6
8 13

National Lacquer & Paint Co. 7415 S. Green Street
(Company Name) Address

Chicago
City

Illinois
State

60621
Zip

0 3 1 6 0 0 0 2 8 3 G
14 Generator Number 24

EPA I.D. #ILD005144837

WASTE HAULER(S)

(1) National Lacquer & Paint Co. 7415 S. Green Street
Hauler Name Hauler Address

S.W.H. Registration Number 0 6 0 1 0 0 1
25 31

(2) _____
Hauler Name Hauler Address

S.W.H. Registration Number _____
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 S. Colfax Avenue
(Facility Name) Address

Griffith
City

Indiana
State

46319
Zip

9 1 8 0 8 9 0 2
39 Site Number 46

E.P.A. I.D. #IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Compound, lacquer, paint, or varnish
removing, reducing, or thinning liquid

K078

NA#1142

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6-4-82

Berry H.
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0 0 1 6 5 0
47 52 1 GALLONS (Circle One)
2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One)

30-55
DRUMS

TANK TRUCK

OPEN TRUCK

OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)

DATE: 06/04/82
54 59

(2) _____
(Authorized Signature)

DATE: ___/___/___

EPA ID #ILD005144837

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[Signature]
(Authorized Signature)

DATE: 6/4/82
60 65

REMARKS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

On dock 6.4.82 6PM
To 125K T-63 6PM 6.4.82

003621

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0115844
1 7

WASTE GENERATOR

Authorization Number _____ 13

National Lacquer & Paint Co. 7415 S. Green Street
(Company Name) Address

03 1 6 0 0 0 2 8 3 G
14 Generator Number 24

Chicago Illinois 60621
City State Zip

EPA I. D. # ILD005144837

WASTE HAULER(S)

(1) National Lacquer & Paint Co. 7415 S. Green Street
Hauler Name Hauler Address

S.W.H. Registration Number 0 6 0 1 0 0 1
25 31

(2) _____
Hauler Name Hauler Address

S.W.H. Registration Number _____
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 S. Colfax Avenue
(Facility Name) Address

9 1 8 0 8 9 0 2
39 Site Number 46

Griffith Indiana 46319
City State Zip

E.P.A. I.D. # THD016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS

WASTE PHASE: LIQUID
(Liquid, gaseous, Solid)

UN1993

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Compound, lacquer, paint or varnish
removing, reducing, or thinning liquid

K078 (F005)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-22-82

Ray Hill
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0 0 1 3 7 5
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ray Hill 9-22-82
(Authorized Signature)

DATE: 09/22/82
34 39

(2) _____
(Authorized Signature)

DATE: _____/_____/_____
60 65

E.P.A. ID # ILD005144837

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

J. Dunfee
(Authorized Signature)

DATE: 9 22 82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

TO 124 RT-636KM 9.22.82

003623

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115845

Authorization Number 8 13

National Lacquer & Paint Co. 7415 S. Green Street

Chicago Illinois 60621

0316000283 Generator Number 14 24

EPA I.D. #ILD005144837

WASTE HAULER(S)

(1) National Lacquer & Paint Co. 7415 S. Green Street

S.W.H. Registration Number 06010101

(2) Hauler Name Hauler Address

S.W.H. Registration Number 32 68

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 S. Colfax Avenue

Griffith Indiana 46319

91808902 Site Number 39 46

E.P.A.I.D. #IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS
NA --1142

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION:

HAZARD CLASS:

Compound, lacquer, paint or varnish
removing, reducing, or thinning liquid

K078 (F-005)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-27-82

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 001375

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

25-55
DRUMS

TANK TRUCK

OPEN TRUCK

OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(Authorized Signature)

DATE: 9/27/82

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 9/27/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 STATE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

15 to 124E T-63 GCM
10 to 204E T-50 GCM

003524

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115846

Authorization Number 8 _____ 13

National Lacquer & Paint Co. 7415 S. Green Street
(Company Name) Address

0316000283 G
Generator Number 24

Chicago City Illinois State 60621 Zip

EPA I.D. #ILD005144837

WASTE HAULER(S)

(1) National Lacquer & Paint Co. 7415 S. Green Street
Hauler Name Hauler Address

S.W.H. Registration Number 0601001 25 31

(2) _____
Hauler Name Hauler Address

S.W.H. Registration Number _____ 32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 S. Colfax Avenue
(Facility Name) Address

91808902 39 Site Number 46

Griffith City Indiana State 46319 Zip

E.P.A. I.D. #IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS
NA-1142

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Compound, lacquer, paint or varnish removing,
reducing, or thinning liquid

K078 (F-005)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-13-82

Betsy Hill
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 000990
47 52

GALLONS (Circle One)
CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

18-55
DRUMS

TANK TRUCK

OPEN TRUCK

OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____
(Authorized Signature)

DATE: 10/13/82 59

(2) _____
(Authorized Signature)

DATE: _____ 59

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

F. Dunfee
(Authorized Signature)

DATE: 10, 13, 82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

To 124 K T-63 EKMA 10.13.82

003025

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115847
7

Authorization Number _____ 13

NATIONAL LACQUER & PAINT CO. 7415 S. Green Street
(Company Name) Address

Chicago Illinois 60621
City State Zip

0316000283
Generator Number 24

EPA I.D. # ILD005144837

WASTE HAULER(S)

(1) NATIONAL LACQUER & PAINT CO. 7415 S. Green Street
Hauler Name Hauler Address

S.W.H. Registration Number 0601001
25 31

(2) _____
Hauler Name Hauler Address

S.W.H. Registration Number _____
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 S. Colfax Avenue
(Facility Name) Address

91808902
Site Number 39 46

Griffith Indiana 46319
City State Zip

E.P.A. I.D. # IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS
NA - 1142

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Compound, lacquer, paint or varnish removing,
reducing, or thinning liquid

K078 (P-005)

THIS IS TO CERTIFY THAT THE ABOVE NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-7-82

Becky Hillis
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 001650

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

30-55

TANK TRUCK

OPEN TRUCK

OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [Signature]
(Authorized Signature)

DATE: 12/08/82

(2) _____
(Authorized Signature)

DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[Signature]
(Authorized Signature)

DATE: 12/8/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

On dock 12.8.82 TO 124KT-63 CRM 12.8.82

003626

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

#01

TO: T/S/D FACILITY AMERICAN CHEMICAL SERVICE E.P.A. ID Code No. INDO-1630265 Address 420 S. Colfax Destination Griffith Indiana Phone 219-924-4370	FROM: Generator NEW PROCESS CORPORATION E.P.A. ID Code No. EXEMPT Address 12722 Tonkel Road Origin Fort Wayne, Indiana Phone 219-627-2147
---	--

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat. ID No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	WASTE PRESS WASH	FLAMMABLE LIQUID		F003		FLAMMABLE

PLACARDS REQUIRED **FLAMMABLE**

NOTE - Where the rate is dependant on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
 \$ _____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse to the carrier, the carrier shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Carrier)

FREIGHT CHARGES

PREPAID COLLECT

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

EMERGENCY RESPONSE INFORMATION

T/S/D FACILITY _____ E.P.A. ID Code No. _____ Address _____ Destination _____	CONTACT Name _____ Phone _____ National Response Center 1-800-424-8802 in D. C. 426-2675
--	---

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 **TECNAS SOLVENT COMPANY** E.P.A. ID No. **MID-039993902**
 Address **5605 Planeview Drive**
 City **Fort wayne** State **IN** Zip **46825** Phone **219-482-9638**

Transporter No. 1 **This is to certify acceptance of the hazardous waste shipment.**
 Signature _____ Date _____

TRANSPORTER #2 E.P.A. ID No. _____
 Address _____
 City _____ State _____ Zip _____ Phone _____

Transporter No. 2 **This is to certify acceptance of the hazardous waste shipment.**
 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY **This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.**
 Signature _____ Date _____

T/S/D F COPY To 204 RT-50
 ERM 10-21-82
 003627

HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

029

MANIFEST DOCUMENT NUMBER

Landgrebe Motor Transit

NAME OF CARRIER

(SCAC)

SHIPPER NUMBER

CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
	IND000718114	NIPSCO - Bailly Generating Station R.R. 3, Box 246, Chasterton, IN 46304 (219) 853-5321	1-11-83
TRANSPORTER # 1	IND00984284	Landgrebe Motor Transit S.R. 130, Valparaiso, IN 46382 (219) 462-4181	1-11-83
TRANSPORTER # 2 (If required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND0136360265	American Chemical Service 420 S. Colfax, Griffith, IN 46319 (219) 924-4370	1/12/83
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1 - 55 gal. drum		0001	Petroleum naphtha (Stoddard Solvent) 80% Butanol 10% Lubricating Oil 10%	1255		34°C		55 gal.		

SPECIAL HANDLING INSTRUCTIONS

If not accepted by TSDf, return to generator.

If an RO commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
Signature _____

Subject to Section 7 of the conditions of this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
(Signature of Consignor) _____

TOTAL CHARGES: \$ _____
FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked. Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

015

MANIFEST DOCUMENT NUMBER

Landgrebe Motor Transit

NAME OF CARRIER

(SCAC)

SHIPPER NUMBER

IND 001 11-24

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND000718114	NIPSCO - Bailly Generating Station 246 Bailly Station Road, Chesterton, IN 46304 (219) 853-5321	11
TRANSPORTER # 1	IND000984284	Landgrebe Motor Transit S.R. 130, Valparaiso, IN 46382, (219) 462-4181	3-14-83
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND0136360265	American Chemical Service 420 S. Colfax, Griffith, IN 46319 (219) 924-4370	2/15/83
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1 - 55 gal. drum		D001	Petroleum naphtha (Stoddard Solvent) 80% Butanol 10% Lubricating Oil 10%	1255		34°C		55 gal.		

SPECIAL HANDLING INSTRUCTIONS

If not accepted by TSDF, return to generator.

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID except when box is checked Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

030

MANIFEST DOCUMENT NUMBER

Landgrebe Motor Transit

SHIPPER NUMBER

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND980793415	NIPSCO - 5265 Hohman Ave., Hammond, Indiana 46320 (219) 853-5321	
TRANSPORTER # 1	IND009842824	Landgrebe Motor Transit, S.R. 130, Valparaiso, Indiana 46382 (219) 462-4181	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Services, 420 S. Colfax, Griffith, Indiana 46319 (219) 924-4370	3/25/83
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
2 - 55 gallon drums		P003	Xylene (xylol)	1307		47	gal.	110		
1 - 55 gallon drum		B001	Motor cleaner	1993			gal.	55		

SPECIAL HANDLING INSTRUCTIONS

If not accepted by TSDF, return to generator.

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

P.O. No. 24797-570

PLACARDS TENDERED

Yes No

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

REMIT C.O.D. TO: ADDRESS

COD

Am't: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID Check box if charges are to be collected

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination, it is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

028

MANIFEST DOCUMENT NUMBER

24371-570

SHIPPER NUMBER

LANDGREBE MOTOR TRANSIT

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND980793145	HIPSCO - 5265 Hohman Ave., Hammond, Indiana 46320 (219) 853-5321	
TRANSPORTER # 1	IND009842824	Landgrebe Motor Transit, S.R. 130, Valparaiso, Indiana 46382 (219) 462-4181	
TRANSPORTER # 2 (If required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Services 420 S. Colfax Ave., Griffith, Indiana 46319	12/10/82
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
2-55 gal. drums		F001	Trichloroethane	2381			gal.	110		
1-55 gal. drum		F003	Xylena (Xylol)	1307			gal.	55		

SPECIAL HANDLING INSTRUCTIONS

If not accepted at TSD, return to generator

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
Signature _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
(Signature of Consignor) _____

TOTAL CHARGES: \$
FREIGHT PREPAID Check box if charges are to be collected

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE _____ TRANSPORTER #2 SIGNATURE & DATE (if required) _____

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

#101

MANIFEST DOCUMENT NUMBER

PO# 23163-590

SHIPPER NUMBER

LANDKEE WASTE TRANSIT

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND0011751	AMERICAN CHEMICAL SERVICE INC. 201 424 4570 410 S CLEAR AVE GRIFFITH TN 37070	
TRANSPORTER #1	IND0011751	LANDKEE WASTE TRANSIT 714 771-0095 SR 130 VALLARTA TN 37383	
TRANSPORTER #2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND01660765	AMERICAN CHEMICAL SERVICE 201 424 4570 410 S CLEAR AVE GRIFFITH TN 37070	5/13/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
39				193			GAL	2145		
							100	24,300		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID except when box is checked Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

024

MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Landgrebe Motor Transit

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
	IND0603729351	Northern Indiana Public Service Company, 5265 Hohman Avenue, Hammond, Indiana 46320 (219) 853-5321	
TRANSPORTER # 1	IND009842824	Landgrebe Motor Transit, S.R. 130, Valparaiso, Indiana 46382 (219) 721-0095	
TRANSPORTER # 2 (if required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical Services, 420 S. Colfax Avenue, Griffith, Indiana 46319 (219) 924-4370	
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
5 - 55 gallon drums		F003	Xylene (Xylol)	1307			gal.	275		
2 - 55 gallon drums		F001	Trichloroethane	2831			gal.	110		
1-55 gallon		F001	Motor Cleaner	1993			gal.	55		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

IF TSDf does not accept, return to generator.

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID except when box is checked Check box if charges are to be collected

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

026
MANIFEST DOCUMENT NUMBER

24047-570
SHIPPER NUMBER

Landgrebe Motor Transit

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND980793145	Northern Indiana Public Service Company, 5265 Hohman Avenue, Hammond, Indiana 46320 (219) 853-5321	
TRANSPORTER # 1	IND009842824	Landgrebe Motor Transit, S.R. 130, Valparaiso, Indiana 46382 (219) 462-4181	
TRANSPORTER # 2 (If required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND01636205	AMERICAN CHEMICAL SERVICE 420 S COLFAX BLVD GRIFT IN IN	10/4
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1-55 gal. drum	B001		Motor Cleaner	1993			gal.	55		
2-55 gal. drums	F003		Sylene (Xylol)	1307			gal.	110		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

If TSDf does not accept, return to generator
On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

\$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

(Signature of Consignor) _____

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT-PREPAID except when box at right is checked. Check box if charges are to be collected

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

[Signature] 10/4/82
GENERATOR'S SIGNATURE DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

[Signature] 10/4/82
TSDf SIGNATURE DATE

5

HAZARDOUS WASTE MANIFEST

0113
 MANIFEST DOCUMENT NUMBER

 SHIPPER NUMBER
1121
 CARRIER NUMBER

Area Sanitary Service
 NAME OF CARRIER (SCAC)

IDENTIFICATION			
GENERATOR/SHIPPER	12 DIGIT EPA ID # IND058958141	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER 1-219-866-5161 Northway Products Company, P.O. Box 300, Rensselaer, Indiana	DATE SHIPPED OR RECEIVED 03/01/82
TRANSPORTER # 1	IHT 190011700	1-583-8770 Area Sanitary Service 503 S. Main Monticello, Ind.	3/1/82
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service P.O. Box 190 Griffith, Ind.	3/1/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	ALTERNATE		

WASTE INFORMATION										
NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
Bulk		NA <i>F105</i>	Waste Solvent	HA 9189 <i>1773</i>	HA	NA <i>15956</i>	Vol	1,600		

SPECIAL HANDLING INSTRUCTIONS If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes No

REMIT C.O.D. TO: ADDRESS Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____	COD Amt: \$ _____ Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. Signature: _____ (Signature of Consignor)	C.O.D. FEE: PREPAID <input type="checkbox"/> COLLECT <input type="checkbox"/> \$ _____ TOTAL CHARGES: \$ _____ FREIGHT CHARGES FREIGHT PREPAID except when box is checked <input type="checkbox"/> Check box if charges are to be collect
--	---	--

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION			
This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency	This is to certify acceptance of the hazardous waste shipment.		
GENERATOR'S SIGNATURE _____ DATE _____	TRANSPORTER #1 SIGNATURE & DATE _____ TRANSPORTER #2 SIGNATURE & DATE (if required) _____ This is to certify acceptance of the hazardous waste for treatment, storage or disposal.		
TSDF SIGNATURE _____ DATE _____	5		

#5

STATE OF ILLINOIS

0307076

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

SPECIAL WASTE HAULING MANIFEST

Authorization Number

OSWEGO INDUSTRIES, INC. 424 E. WASHINGTON ST. OSWEGO ILL. 60543

0938070001 Generator Number

TOBLER TRANSFER LA SALLE - PERU, ILL.

S.W.H. Registration Number IGC ERA # ILD005862339

Hauler Name Hauler Address

S.W.H. Registration Number

AMERICAN CHEMICAL SERVICE 420 SO. COLFAX AVE. INDIANA ILL. 46319 GRIFFITH INDIANA 46319

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE 31X 768340J 91808902

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

XYLENE

F003

WEIGHT FOR D.D.T. USE 1500 LBS. TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 165

1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/18/82

D.S. Mitchell (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Bob Euelhoch - Tobler Transfer Co (Authorized Signature)

DATE: 11/18/82

(2) (Authorized Signature)

DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Mitchell (Authorized Signature)

DATE: 11/19/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

To 2047 7-50 6:44 11.18.82 SITE COPY - PART 3

003036

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0564840

Authorization Number 991653

PARCO PRODUCTS
(Company Name)

4710 W. ROOSEVELT RD. 261 4645
Address Phone Number

0316000744
Generator Number

CHICAGO IL.
City

60650
Zip

ILDo25258047
EPA Number
ILD025258047

WASTE HAULER(S)

H. ROSKIN MOTOR SERVICE SAME
Hauler Name Hauler Address

I.C.C.
S.W.H. Registration Number 25 31

3122817236
Phone Number

ILD045695715
EPA Number

Hauler Name Hauler Address

S.W.H. Registration Number 32 38

Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE
(Facility Name) Address

91808902
Site Number 39 46

GRIFFITH INDIANA 46319 3127683400
City State Zip Phone Number

IN D01-6-76-02-65
EPA Number

Alternate (Facility Name) Address Site Number

City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: TRICHLOROETHYLENE WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION: 75 DRUMS HAZARD CLASS: T UN or NA Number: 1710 EPA HW Number: 1001

WEIGHT FOR D.O.T. USE: 45000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YOS. OR GAL. QUANTITY OF WASTE DELIVERED: 3600 47 52 1 GALLONS (Circle One) 2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One) (DRUMS 75 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) TRAILER

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE: 1/7/82

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature] (Authorized Signature)
(2) [Signature] (Authorized Signature)

DATE: 1/7/82 54 59
DATE: 1/7/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE Frank [Signature] (Authorized Signature) DATE: 1/7/82 60 65

COMMENTS OR SPECIAL INSTRUCTIONS RECLAIM & RETURN

Outdock 1/7/82 61204
To 120KT-63 6PM 1/7/82

003637

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0564841

Authorization Number 991653

PARCO PRODUCTS 4710 W ROOSEVELT 312 261 4645 03 16 00 0744
CHICAGO IL 60650 12 D025258047

WASTE HAULER(S)

H. ROSKIN SAME
Hauler Name Hauler Address
312 261 7236 12 D045695715

Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 9180 8902
GRIFFITH IND. 312 768 3400 12 D016360265

Alternate (Facility Name) Address
City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PERCHLOROETHYLENE WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: 72 DRUMS HAZARD CLASS: T UN or NA Number: 1397 EPA HW Number: F001

WEIGHT FOR D.O.T. USE 45000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 3400 (1) GALLONS (Circle One) CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE: 1/14/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature) DATE: 1/15/82
(2) (Authorized Signature) DATE: 1/15/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature) DATE: 1/15/82

COMMENTS OR SPECIAL INSTRUCTIONS: Reclaim + Return

IN ILLINOIS: 217 / 782-3637 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

On dock - 1/15/82
TO 120R T-63 6100 1/20/82

003038

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0564842

Authorization Number 991653

PARCO PRODUCTS 4710 W. Roosevelt 312 261 4645 0316000744
(Company Name) Address Phone Number Generator Number
Chicago, Il. 60650 ILD025258047
City State Zip EPA Number

WASTE HAULER(S)

H. Roskin Motor Service SAME I.C.C.
Hauler Name Hauler Address S.W.H. Registration Number
312 261 7236 ILD045695715
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number
Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 91808902
(Facility Name) Address Site Number
Griffith, Ind. 46319 312 768 3400 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME PERCHLOROETHYLENE WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION: 75 Drums HAZARD CLASS: T UN or NA Number 1897 EPA HW Number FOOL

WEIGHT FOR D.O.T. USE 45000 LBS TDNS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 35000 GAL. 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 78 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE:

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) (Authorized Signature) DATE 3/11/82
(2) (Authorized Signature) DATE 2/11/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE
(Authorized Signature) DATE 3/11/82

COMMENTS OR SPECIAL INSTRUCTIONS: Reclaim and return

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR
REV. # 3

SITE COPY - PART 3

On dock 3/11/82 6PM
To 120 RT-63 6PM 3/12/82

003539

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0564844

Authorization Number 991653

PARCO PRODUCTS 4710 W ROOSEVELT 312 2446450316 000744
(Company Name) Address Phone Number Generator Number
CHICAGO IL 60650 14 DO 25258047
City State Zip EPA Number

WASTE HAULER(S)
H ROSKIN SAME
Hauler Name Hauler Address
312 261 7236 14 DO 45695715
Phone Number EPA Number
S.W.H. Registration Number ICC
Hauler Name Hauler Address
Phone Number EPA Number
S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICE 918 08902
(Facility Name) Address Site Number
GRIFFITH IND 46319 312 768 3400 14 DO 16360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR
WASTE NAME: CHLORINATED SOLVENTS WASTE PHASE: LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: 42 TRICHLOR 31 PERCHLOR HAZARD CLASS: T UN or NA Number: 1897 1710 EPA HW Number: F001
WEIGHT FOR D.D.T. USE: 45000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 3600 GALLONS (Circle One) 2 CU. YDS. 1
METHOD OF SHIPMENT (Circle One) (DRUMS Number) 73 TANK TRUCK OPEN TRUCK OTHER (Specify) trailer

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
Date: 4/20/82
(Authorized Signature)

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.
(1) (Authorized Signature) DATE: 4/21/82
(2) (Authorized Signature) DATE: 4/21/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.
Frank Price DATE: 4/21/82
(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3
IA SITE COPY - PART 3
42 TO 120 RT-63 GRM 4-21-82 (31) 70 122 RT-63 GRM 4-21-82 003640

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0564843
Authorization Number 991653

PARCO PRODUCTS 4710 W ROOSEVELT 312 261 4645 0316000744
(Company Name) Address Phone Number Generator Number
CHICAGO IL 60650 11 D025250047
City State Zip EPA Number

WASTE HAULER(S)

H. ROSKIN SAME
Hauler Name Hauler Address
312 261 7236 11 D045695715
Phone Number EPA Number
S.W.H. Registration Number ICC

Hauler Name Hauler Address
Phone Number EPA Number
S.W.H. Registration Number

AMERICAN CHEMICAL SERVICE DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
(Facility Name) Address Site Number
GRIFFITH IND 46319 312 7683400 IN D016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME PERCHLOR ETHYLENE WASTE PHASE LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION:

HAZARD CLASS:

72 DRUMS T 1897 F001
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE 45000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 3400 2 GALLONS (Circle One) CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Authorized Signature

DATE: 4/14/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Authorized Signature
(2) Church Valentin
(Authorized Signature)

DATE: 4/20/82
DATE: 4/20/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Frank Price
(Authorized Signature)

DATE: 4/20/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2672

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

Ondock 4/20/82
TO 122 RT-63612M 4-21-82

003641

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0564845
7
991653
8
13
Authorization Number

PARCO PRODUCTS 4710 W ROOSEVELT 312 2614645 031 6000744
(Company Name) Address Phone Number
CHICAGO IL 60650 IL DO 25258047
City State Zip Generator Number
EPA Number

WASTE HAULER(S)
H ROSKIN SAME
Hauler Name Hauler Address
312 261 9236 1400 45645715
Phone Number EPA Number
S.W.H. Registration Number 1CC
Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICE 91808902
(Facility Name) Address Site Number
GRIFFITH IN D 46319 312 7683400 IN DO 16360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR
WASTE NAME: TRICHLOR WASTE PHASE: LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: 77 drums TRICHLOR T HAZARD CLASS: 1710
UN or NA Number EPA HW Number
WEIGHT FOR D.O.T. USE 45000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 3600 GALLONS (Circle One) 2 CU. YDS. 1
METHOD OF SHIPMENT (Circle One) (DRUMS 77 Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
Louis W. Dumas (Authorized Signature) DATE: 4/27/82

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) [Signature] (Authorized Signature) DATE: 4/25/82
(2) [Signature] (Authorized Signature) DATE: 4/25/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
Frank James Price (Authorized Signature) DATE: 4/28/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR
REV. # 3

SITE COPY - PART 3
On dock 4-28-82 GRM
To 122E T-63 GRM 5.6.82
003642

STATE OF ILLINOIS

0564846

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number 991653

PARCO PRODUCTS 4710 W ROOSEVELT 312 2614645 031 6000744
CHICAGO IL 60650 12D025258047

WASTE HAULER(S)

H ROSKIN SAME
Hauler Name Hauler Address
312 2617236 12D025258047
Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 91808902
GRIFFITH IND 46319 312 7683400 12D016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PERCHLOR WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: USED PERCHLOR HAZARD CLASS: T UN or NA Number: 1897 EPA HW Number: F001

WEIGHT FOR D.O.T. USE: 45000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 3400 GALLONS (Circle One) 2 CU. YDS. 1
METHOD OF SHIPMENT (Circle One) (DRUMS Number) 74 TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE: 5/12/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER COONITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE: 5/13/82
(2) (Authorized Signature) DATE: 5/13/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

Frank Price (Authorized Signature) DATE: 5/13/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 122R T-63 GRM 5.13.82

003043

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0564848

Authorization Number ~~991653~~

PARCO PRODUCTS 4710 W. ROOSEVELT 312 261 4645 031 600 0744
(Company Name) Address Phone Number 14 Generator Number 24
CHICAGO IL 60650 1LD025258047
City State Zip EPA Number

WASTE HAULER(S)
H. ROSKIN SAME
Hauler Name Hauler Address
312 261 4645 1CC
Phone Number S.W.H. Registration Number 25
1LD045695715
EPA Number
Hauler Name Hauler Address
S.W.H. Registration Number 32
Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICE 918 08902
(Facility Name) Address 39 Site Number 46
GRIFFITH IN 463A 312 768 3400 1ND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR
WASTE NAME: ORGANIC SOLVENTS WASTE PHASE: LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: HAZARD CLASS:
76 DRUMS PERCHLOR 1710 F001
UN or NA Number EPA HW Number
WEIGHT FOR 45000 LBS WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 3800 1 GALLONS (Circle One)
D.O.T. USE TONS (circle one) CONVERTED TO CU. YDS. OR GAL. 47 52 2 CU. YDS. 53
METHOD OF SHIPMENT (Circle One) (DRUMS 76) TANK TRUCK OPEN TRUCK OTHER (Specify) Number

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
Louis W. [Signature] DATE: 7/7/82
(Authorized Signature)

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED.
(1) [Signature] DATE: 7/7/82
(Authorized Signature) 54 59
(2) [Signature] DATE: []
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY: HAZARDOUS WASTE SUBJECT TO FEE YES NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
[Signature] DATE: 7/9/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0564847

Authorization Number 991653

PARCO PRODUCTS 4710 W Roosevelt 312 2614645 0316000744
(Company Name) Address Phone Number Generator Number
CHICAGO IL 60650 1LD025258047
City State Zip EPA Number

WASTE HAULER(S)

H ROSKIN SAME
Hauler Name Hauler Address
3122614645 1LD045695715
Phone Number EPA Number
S.W.H. Registration Number A ICC

Hauler Name Hauler Address
Phone Number EPA Number
S.W.H. Registration Number

AMERICAN CHEMICAL 420 S Colfax 91808902
(Facility Name) Address Site Number
GRIFFITH IND 46319 3127683400 1ND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: 40 TRICHLOR HAZARD CLASS: 1710
36 1,1,1 TRIETHANE UN or NA Number EPA HW Number F001

WEIGHT FOR D.D.T. USE 45000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 3600 GALLONS (Circle One) 1 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 75) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Louis W. Dawson DATE 6/3/82
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [Signature] DATE 6/11/82
(Authorized Signature) (54) (59)
(2) [Signature] DATE 6/11/82
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY HAZARDOUS WASTE SUBJECT TO FEE YES NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.
[Signature] DATE 6/14/82
(Authorized Signature) (60) (63)

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2672
DISTRIBUTION: PART 1 GENERATOR PART 2 IEPA PART 3 SITE PART 4 HAULER PART 5 IEPA PART 6 GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 6.4.82 GRM
40 Tri TO 122 E T-63 GRM

003645

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0564849

Authorization Number _____

PARCO PRODUCTS 4710 W ROOSEVELT 312 2614645 0.316000744
(Company Name) Address Phone Number 14 Generator Number 24
CHICAGO IL 60650 1LD025258047
City State Zip EPA Number

WASTE HAULER(S)

ROSKIN MOTOR SERVICE SAME
Hauler Name Hauler Address S.W.H. Registration Number 25
312 261 7236 1LD045695715
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32
Phone Number EPA Number

AMERICAN CHEMICAL SERVICE DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
(Facility Name) Address 39 Site Number 46
GRIFFITH IND. 46319 312 768 3400 1ND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PERCHLOR WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: 75 DRUMS HAZARD CLASS: T UN or NA Number: 1897 EPA HW Number: F001

WEIGHT FOR D.O.T. USE 45000 LBS TDNS (Circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 3800 2 GALLONS (Circle One) CU. YDS. 53

METHOD OF SHIPMENT (Circle One) (DRUMS 75) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Louis W. Hanson (Authorized Signature) DATE: 9/20/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature] (Authorized Signature) DATE: [] [] [] []
(2) [Signature] (Authorized Signature) DATE: [] [] [] []

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. DATE: 9, 22, 82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 .24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

TO 120K T-636PM 9.22.82

003646

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0564850
7

Authorization Number 8 13

PARCO PRODUCTS 4710 W ROOSEVELT 3122614645 0.31600744
(Company Name) Address Phone Number 14 Generator Number 24
CHICAGO IL 60650 120025258047
City State Zip EPA Number

H ROSKIN SAME
Hauler Name Hauler Address
3122617236 1CC
Phone Number EPA Number
S.W.H. Registration Number 25 31

Hauler Name Hauler Address
Phone Number EPA Number
S.W.H. Registration Number 32 38

AMERICAN CHEMICAL SERVICE DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
(Facility Name) Address 39 Site Number 46
GRIFFITH IND 46219 3127683400 1ND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR WASTE NAME: TRICHLOROETHYLENE WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: 75 DRUMS HAZARD CLASS: 1710 F00.1
UN or NA Number EPA HW Number
WEIGHT FOR O.T. USE 43000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 3800 GALLONS (Circle One) 2 CU. YDS. 1
METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify) ST

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
A. Dawson (Authorized Signature) DATE: 10/12/82

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) [Signature] (Authorized Signature) DATE: 10/12/82
(2) [Signature] (Authorized Signature) DATE: 10/12/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.
TOP MAUER (Authorized Signature) DATE: 10/13/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0564851

Authorization Number 8 13

PARCO PRODUCTS 4710 W ROOSEVELT 3122614645 0316000744
(Company Name) Address Phone Number Generator Number
CHICAGO IL 60650 14025258047
City State Zip EPA Number

WASTE HAULER(S)
H. ROSKIN SAME 111 111
Hauler Name Hauler Address
3122614645 1111111111
Phone Number S.W.H. Registration Number 25 31
EPA Number
Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICE 91808902
(Facility Name) Address Site Number
GRIFFITH IND 46319 3127683400 INDO16360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PERCHLOR WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: PERCHLORHALENE HAZARD CLASS: T UN or NA Number 1710 EPA HW Number F001

WEIGHT FOR D.O.T. USE 45000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 37500 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS Number) 73 TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND EPA.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 10/19/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)
(2) (Authorized Signature)

DATE: 10/20/82
DATE: 10/20/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 10/21/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-267

DISTRIBUTION: PART 1 GENERATOR PART 2 IEPA PART 3 SITE PART 4 HAULER PART 5 IEPA PART 6 GENERATOR

REV. # 3

SITE COPY - PART 3

TO 1187 7-63 GPM 10/21/82

003648

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0564852
7

Authorization Number 8 13

PARCO PRODUCTS 4710 W ROOSEVELT 312 261 4645 0316000744
(Company Name) Address Phone Number Generator Number
CHICAGO IL 60650 12D025258047
City State Zip EPA Number

WASTE HAULER(S)

H. ROSKIN SAME
Hauler Name Hauler Address
3122617236 12D045695715
Phone Number EPA Number
S.W.H. Registration Number 25 31
Hauler Name Hauler Address
Phone Number EPA Number
S.W.H. Registration Number 32 38

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL 91808902
(Facility Name) Address Site Number
GRIFFITH IN. IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PERCHLOR WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION: PERCHLOR HAZARD CLASS: T UN or NA Number: 1897 EPA HW Number: F001

WEIGHT FOR D.O.T. USE: 45000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 3800 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS Number: 67) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Louis W. Gibson DATE: 12/9/82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Smith (Authorized Signature) DATE: 12/9/82
(2) [Signature] (Authorized Signature) DATE: 12/9/82
American Chem Service
C. B. Sweet

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 12/9/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR
REV. # 3

SITE COPY - PART 3

T-120R T-63 GKM 12.10.82

003649

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS)

Act 136 Waste

Other

MI0127488

Generator's Name Parke Davis & Company	Primary Transporter's Name Mr. Frank	Treatment, Storage or Disposal Facility American Chemical Service
Site Address 188 Howard Avenue	Transporters Address 201 West 155th	Facility Address 420 South Colfax Avenue
Holland, Michigan 49423	South Holland, Illinois 60473	Griffith, Indiana 46319
Phone Number (616) 392-2375	Phone Number (312) 596-3377	Phone Number (219) 924-4370
Generator's Site EPA I.D. Number MI D006013643	Transporter's EPA I.D. Number IL D069506160	Facility Site EPA I.D. Number IN D016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form			Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas			
1.	Flammable Liquid N.O.S.	Flammable Liquid	UN1993	07	1	PT				60500		F003
2.												
3.												
4.												
5.												
6.												

COMMENTS: Include Safety precautions and special handling instructions.
F005 Sp. Gr. - 0.8265
Residue on Ignition - 0.06%
V.P.C. - 0.3% IPA, 23.6% Hexane, 3.8% Heptane, 50.4% Toluene, 21.8% Xylene
***To the best of the generator's knowledge contains no Polychlorinated Biphenyls.**

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: **M Simpson** Date Shipped: **MO. DAY YEAR 060982**

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1 0079018**
 Subsequent Transporter Vehicle I.D. No's: _____
 Transporter Signature: **Robert Perkins** Date(s) Received: **060982**
 Subsequent transporter(s) signature(s): _____

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: **[Signature]** Date Received: **4 9 82**
 Facility Site EPA I.D. Number: **IND016360265**
 Was a Surcharge Assessed? Yes No

Describe any significant discrepancies between manifest and shipment.

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS) Act 136 Waste Other

MI 0127424

Generator's Name Parke Davis + Company	Primary Transporter's Name Mr. Frank	Treatment, Storage or Disposal Facility American Chemical Service
Site Address 188 Howard Avenue Holland, Michigan 49423	Transporters Address 201 West 155th South Holland, Illinois 60473	Facility Address 420 South Colfax Avenue Griffith, Indiana 46319
Phone Number (416) 392-2375	Phone Number (312) 596-3377	Phone Number (219) 924-4370
Generator's Site EPA I.D. Number MI D 0061013643	Transporter's EPA I.D. Number IL D 069506160	Facility Site EPA I.D. Number IND 016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	WASTE INFORMATION	LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container			Form			Total Weight or Volume	Units	Hazardous or Liquid Waste Number
							No.	Type	Solid	Liquid	Gas				
		1.	Flammable Liquid N.O.S.	Flammable Liquid	UN 1993	07	1	PT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	000000	gal	F0013	
		2.													
		3.													
		4.													
		5.													
		6.													

COMMENTS: Include Safety precautions and special handling instructions.
**Sp. Gr. - 0.816 Residue on Ignition 0.10% by weight (5ml.) V.P.C. - Acetone - 0.7%,
 Methyl Alcohol - 0.1%, Isopropyl Alcohol 2.0%, Benzene - 2.2%, Toluene - 28.9%, Xylene - 25.9%,
 Heptane - 1.9%**
*** To the best of the generator's knowledge contains no Polychlorinated Biphenyls**

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: **[Signature]** Date Shipped: **07 08 82**

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1 0079018**
 Subsequent Transporter Vehicle I.D. No's: _____
 Transporter Signature: **[Signature]** Date(s) Received: **07 08 82**
 Subsequent transporter(s) signature(s): _____

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: **[Signature]** Date Received: **7 8 82**
 Site EPA I.D. Number: **IND 016360265**
 Was a Surcharge Assessed? Yes No

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS)

Act 136 Waste

Other

MI 0127465

IDENTIFICATION	Generator's Name <i>Perke Davis & Company</i>	Primary Transporter's Name <i>Mr. Frank</i>	Treatment, Storage or Disposal Facility <i>American Chemical Service</i>
	Site Address <i>188 Howard Avenue</i>	Transporters Address <i>201 West 155th</i>	Facility Address <i>420 Colfax Avenue</i>
	<i>Holland, Michigan 49423</i>	<i>South Holland, Illinois 60473</i>	<i>Griffith, Indiana 46319</i>
	Phone Number <i>(616) 392-2375</i>	Phone Number <i>312-596-3377</i>	Phone Number <i>(219) 924-4370</i>
Generator's Site EPA I.D. Number <i>MI D006013643</i>	Transporter's EPA I.D. Number <i>IL D069506169</i>	Facility Site EPA I.D. Number <i>IND 016360265</i>	

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name)	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container				Form	Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid				
1.	<i>Flammable Liquid N.O.S.</i>	<i>Flammable Liquid</i>	<i>UN1993</i>	<i>071</i>	<i>PT</i>			<input checked="" type="checkbox"/>		<i>151000</i>	<i>Gal</i>	<i>F003</i>
2.												
3.												
4.												
5.												
6.												

Include Safety precautions and special handling instructions:
*Sp. Gr. 0.8600 Residue on Ignition 0.45% by wgt. (5ml) V.P.C. - Toluene 40.0%
 Xylene - 25.4% Heptane - Hexane - 34.6%
 To the best of the generator's knowledge contains no Polychlorinated Biphenyls

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: *[Signature]* Date Shipped: *07/12/82*

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. *No. 1 0179095*

Transporter Signature: *[Signature]* Date(s) Received: *07/12/82*

Subsequent Transporter Vehicle I.D. No's: _____

If the shipment cannot be delivered, describe the reason for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: *[Signature]* Date Received: *07/12/82*

Facility Site EPA I.D. Number: *IND 016360265*

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed? Yes No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4700 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

*T0212KT-506RM 7/12/82
TSDF COPY*

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS) Act 136 Waste (OTHER)

MI 0010796

Generator's Name Parke Davis & Company	Primary Transporter's Name Mr. Frank	Treatment, Storage or Disposal Facility American Chemical Service
Site Address 188 Howard Avenue Holland, Michigan 49473	Transporter's Address 201 West 155th South Holland, Illinois 60473 60473	Facility Address 420 South Colfax Avenue Griffith, Indiana 46319
Phone Number (616) 392-2375	Phone Number (312) 596-3377	Phone Number (219) 924-4370
Generator's Site EPA I.D. Number MTD006013643	Transporter's EPA I.D. Number ILD069506160	Facility Site EPA I.D. Number IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container					Weight or Volume	Units	Hazardous Waste Number
					No.	Type	Solid	Liquid	Gas			
1.	Flammable Liquid N.O.S	Flammable Liquid	UN1993	07	1	PT	✓			0.5000	Gal	F003
2.												
3.												
4.												
5.												
6.												

COMMENTS: Include Safety precautions and special handling instructions.
F005
 Sp. Gr. 0.823 @ 25°C
Residue on Ignition 0.14% / 20ml
V.P.C. Isopropyl Alcohol 8.9%, Hexane 26.9%
Heptane 5.7%, Toluene 27.4%
Xylene 31.1%

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: **On Sampson** Date Shipped: **05/17/82**

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1 0079021**

Transporter Signature: **Robert Pickens** Date(s) Received: **05/17/82**

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: **Amber** Date Received: **5-17-82**

Facility Site EPA I.D. Number: **IND016360265**

Accepted Rejected

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS)

Act 136 Waste

Other

MI 0208505

Generator's Name Parke-Davis Division Warner-Lambert Company	Primary Transporter's Name Mr. Frank	Treatment, Storage or Disposal Facility American Chemical Service
Site Address 188 Howard Avenue Holland, Michigan 49423	Transporters Address 201 West 155th South Holland, Illinois 60473	Facility Address 420 South Colfax Avenue Griffith, Indiana 46319
Phone Number (616) 392-2375	Phone Number (312) 596-3377	Phone Number (219) 924-4370
Generator's Site EPA I.D. Number MI D006013643	Transporter's EPA I.D. Number IL D069508160	Facility Site EPA I.D. Number IN D016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form			Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas			
1.	Flammable Liquid N.O.S.	Flammable Liquid	UN 1993	07	1	PT		X			5000 Gal.	F 0 0 0
2.												
3.												
4.												
5.												
6.												

Include Safety precautions and special handling instructions.
Sp. Gr. - 0.810 Residue on Ignition - 0.07% V.P.C. - Isopropyl Alcohol - 31%, Benzene 6.9%, Heptane/Hexane - 27.0%, Toluene - 48.1%, Ethyl Benzene - 2.9%, Xylene - 10.4%
To the best of the generator's knowledge contains no Polychlorinated Biphenyls.

TRANSPORTER COMPLETES

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

Describe any significant discrepancies between manifest and shipment.

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS)

Act-136 Waste

Other

MI0208504

IDENTIFICATION	Generator's Name Parke-Davis Division Warner-Lambert Company	Primary Transporter's Name Mr. Frank	Treatment, Storage or Disposal Facility American Chemical Service
	Site Address 188 Howard Avenue Holland, Michigan 49423	Transporters Address 201 West 155th South Holland, Illinois 60473	Facility Address 420 South Colfax Avenue Griffith, Indiana 46319
	Phone Number (616) 392-2375	Phone Number (312) 596-3377	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D 0 0 6 0 1 3 6 4 3	Transporter's EPA I.D. Number IL D 0 6 9 5 0 6 1 6 0	Facility Site EPA I.D. Number IN D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container				Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge	1	2			
1.	Flammable Liquid N.O.S.	Flammable Liquid	UN 1993	07	1	PT							005000	Gal.	F 0 0 3
2.															
3.															
4.															
5.															
6.															

COMMENTS: Include Safety precautions and special handling instructions.
*Sp. Gr. - 0.7840 Residue on Ignition - 0.058% V.P.C. Acetone - 0.8% Methyl Alcohol - 4.6%
 Isopropyl Alcohol - 1.3%, Hexane-Heptane - 34%, Benzene - 9.5%, Toluene - 47.0%, Ethyl Benzene 0.6%
 kTo the best of the generators knowledge contains no Polychlorinated Biphenyls*

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: *[Signature]* Date Shipped: **08/10/82**

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1334-18** Subsequent Transporter Vehicle I.D. No's: _____

Transporter Signature: *[Signature]* Date(s) Received: **08/10/82**

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: *[Signature]* Date Received: **8/10/82**

Facility Site EPA I.D. Number: **IN D 0 1 6 3 6 0 2 6 5**

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed? Yes No

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS)

Act 136 Waste

Other

MI0208502

Generator's Name Parke-Davis Division Warner-Lambert Company	Primary Transporter's Name Mr. Frank	Treatment, Storage or Disposal Facility American Chemical Service
Site Address 188 Howard Avenue Holland, Michigan 49423	Transporters Address 201 West 155th South Holland, Illinois 60473	Facility Address 420 South Colfax Avenue Griffith, Indiana 46319
Phone Number 616,392-2375	Phone Number 312,596-3377	Phone Number 219,924-4370
Generator's Site EPA I.D. Number MI D 0 0 6 0 1 3 6 4 3	Transporter's EPA I.D. Number IL D 0 6 9 5 0 6 1 6 0	Facility Site EPA I.D. Number IN D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	Flammable Liquid N.O.S.	Flammable Liquid	UN1993	07	1	PT		X			005000	Gal.	F 0 0 3
2.													
3.													
4.													
5.													
6.													

COMMENTS: Include Safety precautions and special handling instructions. *Sp. Gr. - 0.826 Residue on Ignition - 0.09% Non Volatile Residue 0.13% V.P.C. - Acetone - 2.2%, Isopropyl Alcohol - 3.46%, Benzene - 2.2%, Hexane-Heptane 24.86% Toluene - 58.24%, Ethyl Benzene - 1.52%, Xylene - 5.33% To the best of the Generator's knowledge contains no Polychlorinated Biphenyls.*

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: *[Signature]* Date Shipped: **09/13/82**

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1 #334-18** Subsequent Transporter Vehicle I.D. No's: _____

Transporter Signature: *[Signature]* Date(s) Received: **09/13/82**

Subsequent transporter(s) signature(s): _____

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Site Signature: *[Signature]* Date Received: **9/13/82**

Facility Site EPA I.D. Number: **IND 0 1 6 3 6 0 2 6 5**

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed? Yes No

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS) Act 136 Waste (OTHER)

MI 0010799

Generator's Name Parke Davis & Company	Primary Transporter's Name Mr. Frank	Treatment, Storage or Disposal Facility American Chemical Service
Site Address 188 Howard Avenue Holland, Michigan 49423	Transporters Address 201 West 155th South Holland, Illinois 60473	Facility Address 420 South Colfax Ave Griffith, Indiana 46319
Phone Number (616) 392-2375	Phone Number (312) 596-3377	Phone Number 219 924-4370
Generator's Site EPA I.D. Number MI D00161013643	Transporter's EPA I.D. Number IL D069506160	Facility Site EPA I.D. Number IN D016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container					Form	Weight or Volume	Units	Hazardous Waste Number
					No.	Type	Solid	Liquid	Gas				
1.	Flammable Liquid N.O.S.	Flammable LIQUID	UN1993	07	1	PT						0.05500 Gal.	F003
2.													
3.													
4.													
5.													
6.													

COMMENTS: Include Safety precautions and special handling instructions.
FO05 Sp. Gr. - 0.7845
Residue on Ignition - 0.08%
*** To the best of the generator's knowledge contains no Poly Chlorinated Biphenyls.**
V.P.C. - Methy Alcohol - 1.2%, Acetone - 3.1%, THF - 9.0%, Hexane - 45.7%, Toluene - 34.4%, Xylene - 5.3%

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: **R. M. Simpson**
 Date Shipped: **MO. DAY YEAR**
030282

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1 0019021**
 Subsequent Transporter Vehicle I.D. No's: _____

Transporter Signature: **Robert Parkes**
 Date(s) Received: **030282**

Subsequent transporter(s) signature(s): _____

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: **F. Dimples**
 Facility Site EPA I.D. Number: **IND0116360265**
 Accepted
 Rejected
 Date Received: **3-2-82**

Describe any significant discrepancies between manifest and shipment.

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS)

Act 136 Waste (OTHER)

MI 0010793

IDENTIFICATION	Generator's Name <i>Parker Davis & Company</i>	Primary Transporter's Name <i>Mr. Frank</i>	Treatment, Storage or Disposal Facility <i>American Chemical Service</i>
	Site Address <i>188 Howard Avenue Holland, Michigan 49423</i>	Transporters Address <i>201 West 155th South Holland, Illinois 60473</i>	Facility Address <i>420 South Colfax Avenue Griffith, Indiana 46319</i>
	Phone Number <i>(616) 392-2375</i>	Phone Number <i>(312) 596-3377</i>	Phone Number <i>(219) 924-4370</i>
	Generator's Site EPA I.D. Number <i>MI D101016013643</i>	Transporter's EPA I.D. Number <i>IL D1069506160</i>	Facility's EPA I.D. Number <i>IN D10146300465</i>

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container			Form			Weight or Volume	Units	Hazardous Waste Number
					Type	Solid	Liquid	Gas	Sludge				
1.	<i>Flammable Liquid N.O.S.</i>	<i>Flammable Liquid</i>	<i>UN1993</i>	<i>07</i>	<i>1</i>	<i>PT</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<i>555.2 Gal</i>	<i>F993</i>	
2.													
3.													
4.													
5.													
6.													

COMMENTS: Include Safety precautions and special handling instructions.
F005 Sp. Gr. - 0.873
Residue on Ignition - 0.03% per 20 ml.
V.P.C. - Isopropyl Alcohol - 8.3%, T.H.F. - 0.1%, Hexane - 6.8%, Toluene - 44.7%, Xylene - 38.7%, 1.4% High Boiler
To the best of the generator's knowledge contains no Poly chlorinated Biphenyls

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: *[Signature]* Date Shipped: *03/18/82*

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. *No. 1 10029021*
 Subsequent Transporter Vehicle I.D. No's: _____
 Transporter Signature: *[Signature]* Date(s) Received: *03/18/82*
 Subsequent transporter(s) signature(s): _____

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: *[Signature]* Date Received: *03/18/82*
 Site EPA I.D. Number: *IN D101160610265*
 Accepted
 Rejected

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS)

Act 136 Waste (OTHER)

MI 0010794

IDENTIFICATION	Generator's Name Parke Davis & Company	Primary Transporter's Name Mri. Frank	Treatment, Storage or Disposal Facility American Chemical Service
	Site Address 188 Howard Avenue Holland, Michigan 49423	Transporter's Address 201 West 155th South Holland, Illinois 60473	Facility Address 426 South Coffey Ave Greensburg, Indiana 46319
	Phone Number (616) 392-2375	Phone Number (312) 596-3377	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MTID0016013643	Transporter's EPA I.D. Number 1LD069506160	Facility Site EPA I.D. Number IND016310265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz Class Code	Container		Form				Weight or Volume	Units	Hazardous Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	Flammable Liquid N.O.S.	Flammable Liquid	UN 1993	07	1	PT						5500 Gal	F003
2.													
3.													
4.													
5.													
6.													

COMMENTS: Include Safety precautions and special handling instructions.
F005 Sp. Gr. 0.84
Residue DN Ignition 0.09%
V.P.C. - T.H.F. 3.4%, Hexane 20.2%, Toluene 23.6%
Xylene 52.8%
To the best of the generator's knowledge contains no Polychlorinated Biphenyls.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: **① M. Simpson** Date Shipped: **04 23 82**

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1 0079021** Transporter Signature: **② Michael Monte** Date(s) Received: **04 23 82**

Subsequent Transporter Vehicle I.D. No's: _____ Subsequent transporter(s) signature(s): _____

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: **④ J. Dumpe** Accepted Rejected Date Received: **04 23 82**

Facility Site EPA I.D. Number: **ZW1010116131610165**

Describe any significant discrepancies between manifest and shipment.

T-125-EMERGENCY RESPONSE UNIT 2-87

003607

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS) Act 136 Waste Other **MI 0208501**

Generator's Name Parke-Davis Division Warner-Lambert Company	Primary Transporter's Name Mr. Frank	Treatment, Storage or Disposal Facility American Chemical Service
Site Address 188 Howard Avenue Holland, Michigan 49423	Transporter's Address 201 West 155th South Holland, Illinois 60473	Facility Address 420 South Eolfax Avenue Griffith, Indiana 46319
Phone Number (616) 392-2375	Phone Number (312) 596-3377	Phone Number (219) 924-4370
Generator's Site EPA I.D. Number MI D 0 0 6 0 1 3 6 4 3	Transporter's EPA I.D. Number MI D 0 6 9 5 0 6 1 6 0	Facility Site EPA I.D. Number IND 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid			
1.	Flammable Liquid N.O.S.	Flammable Liquid	UN1993	0,7	1	PT	X		0051010	Gal	F 0 0 1 3
2.											
3.											
4.											
5.											
6.											

COMMENTS: Include Safety precautions and special handling instructions. *Sp Gr 0.804; Residue on ignition 0.008%; Non Volatile residue 11.17%; VPC Acetone 0.10%, Methyl Alcohol 0.57%, Isopropyl Alcohol 6.33%, Hexane/Heptane 36.13%, Benzene 4.48%, Toluene 50.21%, Ethyl Benzene 0.46%, Xylenes 1.35%. To best of Generator's knowledge, contains No PCB's*

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: *[Signature]* Date Shipped: **MO. DAY YEAR** *092182*

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1334-25** Transporter Signature: *[Signature]* Date(s) Received: *092182*

Subsequent Transporter Vehicle I.D. No's: _____ Subsequent transporter(s) signature(s): _____

If the shipment cannot be delivered, describe the reasons for non-delivery:

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: *[Signature]* Date Received: *9.21.82*

Facility Site EPA I.D. Number: *[Signature]*

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed? Yes No

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS) Act 136 Waste Other

MI0208530

IDENTIFICATION	Generator's Name Parke-Davis Division Warner-Lambert Company	Primary Transporter's Name Mr. Frank	Treatment, Storage or Disposal Facility American Chemical Service
	Site Address 188 Howard Avenue Holland, MI 49423	Transporter's Address 201 West 155th South Holland, IL 60473	Facility Address 420 South Colfax Avenue Griffith, Indiana 46319
	Phone Number 616 392-2375	Phone Number (312) 596-3377	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number M I D O O 6 0 1 3 6 4 3	Transporter's EPA I.D. Number I L D O 6 9 5 0 6 1 6 0	Facility Site EPA I.D. Number I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	Flammable Liquid N.O.S.	Flammable Liquid	UN 1993	0 7	1	PT	X				5500	Gal.	F O D B
2.													
3.													
4.													
5.													
6.													

COMMENTS: Include Safety precautions and special handling instructions. *Sp. Gr. - 0.812, Non-Volatile Residue - 10.71%, Residue on Ignition - 0.07%, Assay (VPC) Isopropyl Alcohol - 1.56%, Acetone - 10.73%, Hexane/Hep. tane - 49.15%, Benzene - 5.64%, Toluene - 36.79%, Xylene 1.83%*
**To the best of the generator's knowledge contains no Polychlorinated Biphenyls.*

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: *P.M. Simpson* Date Shipped: *11/10/82*

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1 0079051** Transporter Signature: *Michael J. ...* Date(s) Received: *11/10/82*

Subsequent Transporter Vehicle I.D. No.'s: _____ Subsequent transporter(s) signature(s): _____

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: *Frank ...* Accepted Date Received: *11/10/82*
 Rejected

Facility Site EPA I.D. Number: **M I D O O 6 0 1 3 6 4 3**

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed? Yes
 No

00360

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS) Act 136 Waste Other **MI 0208529**

IDENTIFICATION	Generator's Name Parke-Davis Division Warner-Lambert Company	Primary Transporter's Name Mr. Frank	Treatment, Storage or Disposal Facility American Chemical Service
	Site Address 188 Howard Avenue Holland, MI 49423	Transporter's Address 201 West 155th South Holland, IL 60473	Facility Address 420 South Colfax Avenue Griffith, Indiana 46319
	Phone Number (616) 392-2375	Phone Number (312) 596-3377	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MID006013643	Transporter's EPA I.D. Number ILD069506160	Facility Site EPA I.D. Number IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form			Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas			
1.	Flammable Liquid No. 3.	Flammable Liquid	UN 1993	07	PT	PT	X			005000	Gal.	F00B
2.												
3.												
4.												
5.												
6.												

COMMENTS: Include Safety precautions and special handling instructions. *Sp. Gr. 0.8080 Non-Volatile Residue - 7.4%, Residue on Ignition - 2.0%, V.P.C. - Methyl Alcohol - 0.0%, Acetone - 2.6%, Isopropyl Alcohol - 6.6%, Benzene - 5.2%, Hexane/Heptane - 35.9%, Toluene - 39.3%, Ethyl Benzene - 1.2%, Xylene - 5.5%*
**To the best of the generator's knowledge contains no Polychlorinated Biphenyls.*

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: *[Signature]* Date Shipped: **102882**

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1 0079 029**

Transporter Signature: *[Signature]* Date(s) Received: **102882**

Subsequent transporter(s) signature(s): _____

If the shipment cannot be delivered, describe the reasons for non-delivery:

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: *[Signature]* Date Received: **102882**

Facility Site EPA I.D. Number: **IND016360265**

Describe any significant discrepancies between manifest and shipment:

Was a Surcharge Assessed? Yes No

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS)

Act 136 Waste

Other

MI 0208531

IDENTIFICATION	Generator's Name Parke-Davis Division Warner-Lambert Company	Primary Transporter's Name Mr. Frank	Treatment, Storage, or Disposal Facility American Chemical Service
	Site Address 188 Howard Avenue; Holland, MI 49423	Transporter's Address 201 West 155th South Holland, IL 60473	Facility Address 420 South Colfax Avenue Griffith, Indiana 46319
	Phone Number (616) 392-2375	Phone Number (312) 596-3377	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D O O 6 0 1 3 6 4 3	Transporter's EPA I.D. Number I L D O 6 9 5 0 6 1 6 0	Facility Site EPA I.D. Number I N D O 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES
WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	Flammable Liquid N.O.S.	Flammable Liquid	UN 9993	07	1	PT		X			1500	gal	FO03
2.													
3.													
4.													
5.													
6.													

COMMENTS: Includes Safety precautions and special handling instructions. Sp. Gr. - 0.800, Non-Volatile Residue - 2.09%, Residue on Ignition 0.002%, Assay (VPC) Methyl Alcohol - 0.06%, Acetone - 0.73%, Isopropyl Alcohol - 5.75%, Benzene - 4.00%, Hexane/Heptane - 47.90%, Toluene - 27.99%, Ethyl Benzene - 2.59%, Xylene 10.43%
*To the best of the generator's knowledge contains no Polychlorinated Biphenyls.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: *[Signature]* Date Shipped: **MO. DAY YEAR** 11/19/82

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1334-21**

Transporter Signature: *[Signature]* Date(s) Received: **11/19/82**

Subsequent Transporter Vehicle I.D. No's: _____

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: *[Signature]* Date Received: **11/19/82**

Facility Site EPA I.D. Number: **INDO16360265**

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed? Yes No

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS)
 Act 136 Waste
 Other
 MI 0208585

Generator's Name Warner-Lambert Company	Primary Transporter's Name Mr. Frank	Treatment, Storage or Disposal Facility American Chemical Service
Site Address 188 Howard Avenue Holland, Michigan 49423	Transporter's Address 201 West 155th South Holland, Illinois 60473	Facility Address 420 South Colfax Avenue Griffith, Indiana 46319
Phone Number 616 392-2375	Phone Number 312 596-3377	Phone Number 219 924-4370
Generator's Site EPA I.D. Number MI D006013643	Transporter's EPA I.D. Number IL D069506160	Facility Site EPA I.D. Number IN D016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name)	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container			Form			Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas				
1.	Flammable Liquid N.	Flammable Liquid	UN 1993	07	1	PT	X				5500	Gal.	F 003
2.													
3.													
4.													
5.													
6.													

COMMENTS: Include Safety precautions and special handling instructions. *Sp. Gr. - 0.800, Non Volatile Residue - 6.94%, Residue on Ignition - 0.01%*
Assey (VPC) Methyl Alcohol - 0.9%, Acetone - 1.8%, Isopropyl Alcohol - 7.5%, Benzene - 5.4%
Hexane/Heptane - 42.6%, Toluene - 27.9%, Xylene (Ethyl Benzene) - 11.0%
**To the best of the generator's knowledge contains no Polychlorinated Biphenyls.*

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: *[Signature]* Date Shipped: **11/29/82**

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1 0079021** Transporter Signature: *[Signature]* Date(s) Received: **11/29/82**
 Subsequent Transporter Vehicle I.D. No's: _____ Subsequent transporter(s) signature(s): _____

If the shipment cannot be delivered, describe the reasons for non-delivery:

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSD Facility Site EPA I.D. Number: **IND016360265** Accepted Rejected Date Received: **11/29/82**

Describe any significant discrepancies between manifest and shipment: _____
 Was a Surcharge Assessed? Yes No

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS)

Act 136 Waste

Other

MI 0208506

Generator's Name Parke-Davis Division Warner-Lambert Company	Primary Transporter's Name Mr. Frank	Treatment, Storage or Disposal Facility American Chemical Service
Site Address 188 Howard Avenue Holland, Michigan 49423	Transporter's Address 201 West 155th South Holland, Illinois 60473	Facility Address 420 South Colfax Avenue Griffith, Indiana 46319
Phone Number 616 392-2375	Phone Number 312 596-3377	Phone Number 219 924-4370
Generator's Site EPA I.D. Number M I D 0 0 6 0 1 3 6 4 3	Transporter's EPA I.D. Number I L D 0 6 9 5 0 6 1 6 0	Facility Site EPA I.D. Number I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name)	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container Form					Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas			
1.	Flammable Liquid N.O.S.	Flammable Liquid	UN 1993	0 7	1	PT	X			5500	Gal.	F 0 0 3
2.												
3.												
4.												
5.												
6.												

Include Safety precautions and special handling instructions. *Sp. Gr. - 0.810 Non Volatile Residue - 10.06% Residue on Ignition - 0.04% V.P.C. Assay - Acetone - 0.37% Methyl Alcohol - 0.29% Isopropyl Alcohol - 4.96% Benzene - 3.54% Hexane/Heptane - 33.63% Toluene - 5.42% Ethyl Benzene - 1.10% Xylene - 4.48%*
**To the best of the generator's knowledge contains no Polychlorinated Biphenyls*

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: *Rita J. Lane* Date Shipped: **10/1/82**

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1 413**
 Subsequent transporter Vehicle I.D. No's: _____
 Transporter Signature: *CE Wilburn* Date(s) Received: **10/1/82**
 Subsequent transporter(s) signature(s): _____

If the shipment cannot be delivered, describe the reasons for non-delivery:

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: *[Signature]* Date Received: **10/1/82**
 Facility Site EPA I.D. Number: **IND 0 1 6 3 6 0 2 6 5**
 Accepted
 Rejected

Describe any significant discrepancies between manifest and shipment:

Was a Surcharge Assessed? Yes No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TSDF COPY TO 212 F 7-50 6RM 10/1/82

00300

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS)

Act 136 Waste

Other

MI0208584

Generator's Name Parke-Davis Division Warner-Lambert Company	Primary Transporter's Name Mr. Frank	Treatment, Storage or Disposal Facility American Chemical Service
Site Address 188 Howard Avenue Holland, Michigan 49423	Transporter's Address 201 West 155th South Holland, Illinois 60473	Facility Address 420 South Colfax Avenue Griffith, Indiana 46319
Phone Number 616 392-2375	Phone Number 312 596-3377	Phone Number (219) 924-4370
Generator's Site EPA I.D. Number MI D O O 6 0 1 3 6 4 3	Transporter's EPA I.D. Number IL D O 6 9 5 0 6 1 6 0	Facility Site EPA I.D. Number IN D O 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name)	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid			
1.	Flammable Liquid N.O.S.	Flammable Liquid	UN 1993	0, 7	1	PT	X		5500	Gal.	F 0 0 3
2.											
3.											
4.											
5.											
6.											

COMMENTS: Include safety precautions and special handling instructions. *Sp. Gr. - 0.804, Non Volatile Residue - 6.26%, Residue on Ignition - 0.05% Assay (VPC) Methyl Alcohol - 1.25%, Acetone - 9.3%, Isopropyl Alcohol - 2.47%, Hexane/Heptane - 55.62%, Benzene - 4.77%, Toluene - 18.34%, Xylene - 7.47%*
**To the best of the generator's knowledge contains no Polychlorinated Biphenyls.*

TRANSPORTER COMPLETES

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature <i>Doug [Signature]</i>	Date Shipped MO. DAY YEAR 12 1 38 2
HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 0079021 Subsequent Transporter Vehicle I.D. No's	Transporter Signature <i>Michael [Signature]</i> Subsequent transporter(s) signature(s)
Date(s) Received 12 1 38 2		

If the shipment cannot be delivered, describe the reasons for non-delivery:

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature <i>[Signature]</i> Facility Site EPA I.D. Number IND 0 1 6 3 6 0 2 6 5	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 12 1 38 2
Describe any significant discrepancies between manifest and shipment.	Was a Surcharge Assessed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

To IPR-T-50 6PM 12.13.82

TSDF COPY

003000

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552621

Authorization Number 920626
8 13

PAYMASTER CORP. 1811 W. WINNEMAC 312/878-9200 0316000872
(Company Name) Address Phone Number Generator Number
CHICAGO ILL. 60640 IL0005067913
City State Zip EPA Number

WASTE HAULER(S)

NATIONAL LACQUER 7415 S. GREEN ST. S.W.H. Registration Number 0601001
Hauler Name Hauler Address 25 31
312/783-0220 IL0005144837
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. 420 S. COLFAX AVE. 91808902
(Facility Name) Address 39 46
GRIFFITH IND. 46319 312/683400 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION:

HAZARD CLASS:

HAZARDOUS

K078

NA1142
UN or NA Number

F003
EPA HW Number

WEIGHT FOR D.O.T. USE 2000 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 000220 0 GALLONS (Circle One)
47 52 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(ORUMS 4)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Bruce W. [Signature]
(Authorized Signature)

DATE: 4/15/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED.

(1) [Signature]
(Authorized Signature)

DATE 4/15/82
54 59

(2) _____
(Authorized Signature)

DATE _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[Signature]
(Authorized Signature)

DATE 4/19/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 210 R T-50 6PM
4.19.82

003667

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552625

Authorization Number [Redacted]

PAYMASTER CORP. 1811 W. WINNEMAC 312/878-9200 0316000872
(Company Name) Address Phone Number Generator Number
CHICAGO ILL. 60640 ILD0005067913
City State Zip EPA Number

WASTE HAULER(S)

NATIONAL LACQUER 7415 S. GREEN ST. 312/783-0220 0601001
Hauler Name Hauler Address Phone Number S.W.H. Registration Number
EPA Number ILD0005144837

Hauler Name Hauler Address Phone Number S.W.H. Registration Number
EPA Number

AMERICAN CHEMICAL SERV. 420 S. COLFAX AVE 91808902
(Facility Name) Address Site Number
GRIFFITH IND. 46349 312/7683400 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR
WASTE NAME: ORGANIC SOLVENTS WASTE PHASE: LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
(Liquid, Gaseous, Solid)
SHIPPING DESCRIPTION: HAZARDOUS HAZARD CLASS: K078 UN or NA Number: NA1142 EPA HW Number: F005
WEIGHT FOR D.O.T. USE: 1000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 000 1 10 2 CU. YDS. 1
METHOD OF SHIPMENT (Circle One): (DRUMS 2) TANK TRUCK, OPEN TRUCK, OTHER (Specify): VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
Bruce Wieszowski DATE: 7/2/82
(Authorized Signature)

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.
(1) [Signature] DATE: 7/2/82
(Authorized Signature) 54 59
(2) [Signature] DATE: 7/2/82
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE
[Signature] DATE: 7/9/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552626

Authorization Number 8 13

PAYMASTER CORP. 1811 W. WINNEMAC 312/878-9200 0316000872
(Company Name) Address Phone Number Generator Number
CHICAGO ILL. 60640 ILD005067913
City State Zip EPA Number

WASTE HAULER(S)

NATIONAL LACQUER 7415 S. GREEN ST. S.W.H. Registration Number 0601001
Hauler Name Hauler Address 25 31
312/783-0220 ILD0005144837
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SEV. 420 S. COLFAX AVE. 91808902
(Facility Name) Address 39 46
GRIFFITH IND. 46319 312/7683400 ENDO16360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME ORGANIC SOLVENTS WASTE PHASE LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

HAZARDOUS

K078

NA1142
UN or NA Number

F005
EPA HW Number

WEIGHT FOR D.O.T. USE 1500 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 000165 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number) 2

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Brian W. ...
(Authorized Signature)

DATE: 7/16/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) *Nath. Lacquer*
(Authorized Signature)

DATE: 9/16/82

(2) _____
(Authorized Signature)

DATE: 1/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

J. Purfee
(Authorized Signature)

DATE: 9/22/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 124K T-63 6PM 9.22.82

003669

HAZARDOUS WASTE MANIFEST

10

MANIFEST DOCUMENT NUMBER

Area Sanitation Service

SHIPPER NUMBER
4127

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND005080288	Peters-Ravington Furniture Corp. Delphi Ind. 46923	8/9/85
TRANSPORTER # 1	INT 190011700	Area Sanitation Service 503 Main St Monticello IN 47960	8/9/85
TRANSPORTER # 2 (If required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service P O Box 190 Griffith IN 46319	8/10/85
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	ALTERNATE		

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
29	x	F005	Flammable Liquid	1993		1595G		1600		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID (except when box is checked) Check box if charges are to be collected

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment storage or disposal

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

11
MANIFEST DOCUMENT NUMBER

Area Sanitation Service
NAME OF CARRIER

(SCAC)

SHIPPER NUMBER
#127
CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
	IND005080288	Peters-Revington Furniture Corp. Delphi IN 46923	
TRANSPORTER # 1	INT 190011700	Area Sanitation Service 503 Main St Monticello IN 47960	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service P O Box 190 Griffith IN 46319	8/11/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
29	x	F005	Flammable Liquid	1993		1595G		1600		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes No

REMIT C.O.D. TO: ADDRESS

COD Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
Signature _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
(Signature of Consignor) _____

TOTAL CHARGES: \$
FREIGHT CHARGES
FREIGHT PREPAID Check box if charges are to be collect
except when box at right is checked

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE _____ TRANSPORTER #2 SIGNATURE & DATE (if required) _____
This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE _____

DATE _____

TSDF SIGNATURE _____

DATE _____

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0434288

Authorization Number 997789

Peterson Paving Co Rt 114 E Ast 815 4726401 0910650001
(Company Name) Address Phone Number Generator Number
Momence ILL 60954 ILD 82089012
City State Zip EPA Number

WASTE HAULER(S)

American Chemical Serv. 420 S. Colfax Ave Griffith Ind
Hauler Name Hauler Address S.W.H. Registration Number 0024001
C/O STRAND TRUCKING 2199244370 ILT000646810
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number
Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 S. Colfax Ave 91808902
(Facility Name) Address Site Number
Griffith Ind 46319 2199244370 ILD 016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME Chlorinated Solvent WASTE PHASE Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Chlorinated Solvent

UN1593
UN or NA Number

F001
EPA HW Number

WEIGHT FOR
D.D.T. USE

26240 LBS
(circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002392
CU. YDS.

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS 46)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Jack Miller
(Authorized Signature)

DATE: 1/7/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

Thomas Strand
(Authorized Signature)

DATE: 01/07/82

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael D. Buig
(Authorized Signature)

DATE: 1/7/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 1/7/82 GRM
to #3 still T-63 GRM 1/13/82

003672

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0434289

Authorization Number ~~897789~~

Petersen Puritan (Company Name) Rt 114 Mokena, ILL (Address) 715 472 6401 (Phone Number) 0910650001 (Generator Number) 14 (City) ILL (State) 60454 (Zip) ILD-082089012 (EPA Number)

WASTE HAULER(S)

strand Trucking (Hauler Name) 13642 Kerton Crestwood, ILL 60445 (Hauler Address) 312 385 8440 (Phone Number) 0024002 (S.W.H. Registration Number) ILT000646810 (EPA Number)

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name) 4205 Colfax Ave (Address) 91808902 (Site Number) Griffith (City) Ind (State) 46319 (Zip) 2199244370 (Phone Number) IND016360365 (EPA Number)

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME organic solvent WASTE PHASE liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: organic solvent HAZARD CLASS: UN1593 F001
WEIGHT FOR D.O.T. USE 32000 (LBS) TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 003000 (47) (52) GALLONS (Circle One) 1 (53)
METHOD OF SHIPMENT (Circle One) (DRUMS 60) (Number) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Jack Miller (Authorized Signature) DATE 8/13/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) Stan Strand (Authorized Signature) DATE 8/13/82
(2) _____ (Authorized Signature) DATE _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X
Medical & Pharmacy (Authorized Signature) DATE 8/13/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

On deck 8.13.82 GPM 34 To 210R 7-50
EPM 5-19-82
26 To 119R T-63 62410

003673

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0434290

Authorization Number ~~992789~~

Peterson Puritan Inc (Company Name) Rt 114 MAMENCE, ILL (Address) 815 4726401 (Phone Number) 0910650001 (Generator Number) 24
Mamence (City) ILL (State) 60954 (Zip) ILD083089012 (EPA Number)

WASTE HAULER(S)

Starnd Trucking (Hauler Name) 13642 Kenton, Crestwood, IL 60445 (Hauler Address) 0024001 (S.W.H. Registration Number) 3123858440 (Phone Number) ILT000646810 (EPA Number)
Hauler Name Hauler Address S.W.H. Registration Number Phone Number EPA Number

American Chemical Service (Facility Name) 420 S. Colfax Ave (Address) 91808902 (Site Number) 46
Griffith (City) IND (State) 46319 (Zip) 2199244370 (Phone Number) IND016360265 (EPA Number) 39
Alternate (Facility Name) Address Site Number EPA Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: organic solvent WASTE PHASE: Liquid (Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: organic solvent HAZARD CLASS: FLAMMABLE UN1593 (UN or NA Number) F001 (EPA HW Number)
WEIGHT FOR D.O.T. USE: 29000 LBS (circle one) TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 002400 (circle one) CU. YDS. (circle one) GALLONS (circle one) CU. YDS. (circle one)
METHOD OF SHIPMENT (Circle One) (DRUMS 46) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND EPA.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Jack Miller (Authorized Signature) DATE: 8/13/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.
(1) Starnd (Authorized Signature) DATE: 8/13/82
(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: HAZARDOUS WASTE SUBJECT TO FEE YES NO X
Michael (Authorized Signature) DATE: 8/13/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 8.13.82 6:11 PM 19 TO 202 K T-50
27 TO 210 E T-50 6:00
E. 13.82
003674

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0312011
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 7 9 6
8 13

PANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370

(Company Name) Waukegan, Address Illinois 60085
City State Zip

0 9 7 1 9 0 0 0 2 G
14 24
Generator Number
I L D 0 0 5 2 0 3 4 7 6

MR. FRANK, INC. 201 W. 155th St.
Hauler Name Hauler Address
South Holland, IL

S.W.H. Registration Number 0 0 7 9 0 0 1
25 31
I L D 0 6 9 5 0 6 1 6 0

Hauler Name Hauler Address

S.W.H. Registration Number _____
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES, INC., 420 So. Colfax
(Facility Name) Address
Griffith, IN 46319
City State Zip

9 1 8 0 8 9 0 2
39 46
Site Number
I N D 0 1 6 3 6 0 2 6 5

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

UN 1090
F 003
ID U 002

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone

Flammable Solvent

WEIGHT FOR
D.O.T. USE _____

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002850
47 52

1 GALLONS (Circle One)
2 CU. YDS. _____
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: Jan. 20, 1982

E. S. Holstein

(Authorized Signature) **E. S. Holstein**

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)

DATE: 01 / 20 / 82
54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 01 / 20 / 82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

To # 8 Steel T-63 61RM 1/20/82 SITE COPY - PART 3

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

0312010

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997796

PFANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370

(Company Name) Address 60085 Waukegan, IL Illinois State Zip

0971900002 Generator Number ILD005203476

WASTE HAULER(S)

MR. FRANK, INC. 201 W. 155th St. South Holland, IL

S.W.H. Registration Number 00790 ILD069506160

Hauler Name Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES, INC., 420 So. Colfax Griffith, IN 46319

91808902 Site Number INDO16360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Acetone

WASTE PHASE: Liquid (Liquid, Gaseous, Solid)

UN 1090 F 003 ID U 002

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Acetone

HAZARD CLASS: Flammable Solvent

WEIGHT FOR D.O.T. USE LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 003000

1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: January 15, 1982

(Authorized Signature) E. S. Holstein

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 01 / 15 / 82

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 01 / 15 / 82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

To #8 Still T-63 2/10/82 1/14/82 SITE COPY - PART 3

003676

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0312013
7

SPECIAL WASTE HAULING MANIFEST

9 9 7 7 9 6
Authorization Number 8 13

PFANSTIEHL LABORATORIES, INC. 1219 Glen Rock Ave. (312) 623-0370

(Company Name) Address
Waukegan Illinois 60085
City State Zip

0 9 7 1 9 0 0 0 0 2
Generator Number 14 24
ILD 0 0 5 2 0 3 4 7 6

MR. FRANK, INC. 201 W. 155th St.
Hauler Name Hauler Address
So. Holland, IL

10 0 7 9 0 27
S.W.H. Registration Number 25 31
ILD 069506160

Hauler Name Hauler Address S.W.H. Registration Number 32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES, INC., 420 So. Colfax
(Facility Name) Address

9 1 8 0 8 9 0 2
39 Site Number 46

Griffith, IN 46319
City State Zip

IND 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

UN 1090

F 003

ID U-002

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone

Flammable Solvent

WEIGHT FOR
D.O.T. USE

LBS
(TONS (circle one))

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED:

00 3 0 0 0
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: Feb., 8, 1982

(Authorized Signature) E. S. Holstein

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Royal Bridgwater
(Authorized Signature)

DATE: 02 / 08 / 82
54 59

(2) _____
(Authorized Signature)

DATE: 02 / 08 / 82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Bob Mauck
(Authorized Signature)

DATE: 02 / 08 / 82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

To # 8 still 7-63 GRM 2/8/82 SITE COPY - PART 3

003677

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0312014

Authorization Number 997796

Pfanstiehl Laboratories, Inc. 1219 Glen Rock Avenue (312) #623-0370
(Company Name) Address

Waukegan Illinois 60085
City State Zip

0971900002 G
Generator Number 24

ILD 005203476

Mr. Frank, Inc. 201 W. 155th St.
Hauler Name Hauler Address
South Holland, IL
Hauler Name Hauler Address

S.W.H. Registration Number 0079027 31
ILD 069506160

S.W.H. Registration Number _____ 32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES, INC., 420 So. Colfax
(Facility Name) Address

Griffith IN 46319
City State Zip

91808902 39 Site Number 46

IND 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

UN 1090
F 003
ID U-002

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone

Flammable Solvent

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. DR GAL

QUANTITY OF WASTE DELIVERED: 003000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: Feb. 12, 1982

Edward S. Holstein
(Authorized Signature) **E. S. Holstein**

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ronald Bridgewater
(Authorized Signature)

DATE: 02/12/82

(2) _____
(Authorized Signature)

DATE: 02/12/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Bob Mauck
(Authorized Signature)

DATE: 02/12/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

To # 8 Still T-63 GRM 2/12/82 SITE COPY - PART 3

003678

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0312017

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 7 9 6
8 13

PFANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370

(Company Name)

P.O. Box 439 Address

0 9 7 1 9 0 0 0 0 2 6
14 Generator Number 24

Waukegan, IL

IL

60085

ILD 0 0 5 2 0 3 4 7 6

City

State

Zip

WASTE HAULER(S)

MR. FRANK, INC.

201 W. 155th St.

S.W.H. Registration Number 0 0 7 9 0 27
25 31

Hauler Name

Hauler Address

ILD 0 6 9 5 0 6 1 6 0

So. Holland, IL

Hauler Name

Hauler Address

S.W.H. Registration Number _____
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES, INC., 420 So. Colfax

(Facility Name)

Address

9 1 8 0 8 9 0 2
39 Site Number 46

Griffith, IN

46319

IND 0 1 6 3 6 0 2 6 5

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

UN 1090

F 003

ID U 002

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone

Flammable Solvent

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 3,000

1 GALLONS (Circle One)
1 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: Feb. 26, 1982

Edward S. Holstein
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)

DATE: 02 / 26 / 82
54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 02 / 26 / 82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINDIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

To # 8 Still T-63 GRM 2/26/82

SITE COPY - PART 3

003679

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0418399

Authorization Number 9 9 7 7 9 6
8 13

Pfanstiehl Laboratories, INC 1219 Glen Rock Ave. 3 1 2 6 2 3 0 3 7 0 0 9 7 1 9 0 0 0 0 2 G
(Company Name) Address Phone Number Generator Number 24
Waukegan **Illinois** **60085** **ILD 00 5 2 0 3 4 7 6**
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. 201 W. 155th St. S.W.H. Registration Number 0 0 7 9 0 27
Hauler Name Hauler Address Phone Number EPA Number 31
South Holland, IL

Hauler Name Hauler Address Phone Number EPA Number 38
S.W.H. Registration Number 32
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES, INC. 420 S. Colfax 9 1 8 0 8 9 0 2
(Facility Name) Address Phone Number Site Number 46
Griffith **IN** **46319** **IND 0 1 6 3 6 0 2 6 5**
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Phone Number Site Number 39
City State Zip Phone Number EPA Number 46

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone Flammable Solvent

UN 1 0 9 0

UN or NA Number

EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED 80 300 0 1 GALLONS (Circle One) 4
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One) (DRUMS _____) TANK TRUCK OPEN TRUCK OTHER (Specify) _____
Number

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

E.S. Holstein no
(Authorized Signature) **E.S. Holstein**

DATE: March 9, 1982

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [Signature]
(Authorized Signature)

DATE: 0 3 / 0 9 / 8 2
54 59

(2) _____
(Authorized Signature)

DATE: 0 3 / 0 9 / 8 2

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 0 3 / 0 9 / 8 2
60 65

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

TO # 8 STW T-63 60M 3/9/82

003680

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0418400

Authorization Number 9 9 7 7 9 6
8 13

Pfanstiehl Laboratories, Inc. 1219 Glen Rock 3 1 2 6 2 3 0 3 7 0 0 9 7 1 9 0 0 0 0 2 6
(Company Name) Address Phone Number Generator Number
Waukegan **Illinois** **60085** **ILD** **0 0 5 2 0 3 4 7 6**
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. 201 W. 155th St. S.W.H. Registration Number 0 0 7 9 0 0 1
Hauler Name Hauler Address EPA Number
ILD 0 6 9 5 0 6 1 6 0

South Holland, IL Phone Number EPA Number

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES, INC., 420 So. Celfax 9 1 8 0 8 9 0 2
(Facility Name) Address Site Number

Griffith **IN** **46319** **IND 0 1 6 3 6 0 2 6 5**
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: **Acetone** WASTE PHASE: **Liquid**
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone **Flammable Solvent**

U N 1, 0 9 0

UN or NA Number

EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS
_____ TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: **F 003** **ID U-002** **0 0 3, 0 0 0** 1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS Number) **TANK TRUCK** OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Edward S. Holstien
(Authorized Signature) **E.S. Holstien**

DATE: **March 16, 1982**

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) *Mike Beger*
(Authorized Signature)

DATE: **03 / 16 / 82**

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: **03 / 16 / 82**

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

To install T-63 CRM 3/16/82

003081

STATE OF ILLINOIS

TO BE COMPLETED BY
WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0418429

Authorization Number 9 9 7 7 9 6
8 13

PfANSTIEHL LABORATORIES, INC., 1219 Glen Rock (312) 623-0370 0 9 7 1 9 0 0 0 0 2
(Company Name) P.O. Box 439 Phone Number 14 Generator Number 24
Waukegan, IL 60085 I L D 0 0 5 2 0 3 4 7 6
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. 201 W. 155th St. 0 0 7 9 0 1 9
Hauler Name Hauler Address S.W.H. Registration Number 25 31
So. Holland, IL 312 596 3377 I L D 0 6 9 5 0 6 1 6 0
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services, Inc., 420 So. Colfax 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith, IN 46319 219 924 4370 I N D O 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Waste Acetone HAZARD CLASS: Flammable Solvent

U N 1 0 9 0 F 0 0 3
UN or NA Number EPA HW Number

WEIGHT FOR D.D.T. USE 19,200 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 00 3000 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) E. S. Holstein DATE March 29, 1982

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature) DATE 03 / 29 / 82
(2) (Authorized Signature) DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. (Authorized Signature) DATE 3 29 82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-BB02 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO # 85411 T-63 GRM 3/29/82

003682

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST

0418430

997796

Authorization Number 8 13

PFANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370

0971900002

(Company Name) Address Phone Number Generator Number EPA Number Waukegan, IL 60085 ILD005203476

WASTE HAULER(S)

Mr. Frank, Inc. 201 W. 155th St.

S.W.H. Registration Number 0079027

Hauler Name Hauler Address So. Holland, IL

(312) 596-3377

ILD069506160

Hauler Name Hauler Address

S.W.H. Registration Number 32

Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services, Inc., 420 So. Celfax

91808902

(Facility Name) Address City State Zip Phone Number EPA Number Griffith, IN 46319 (219) 924-4370 INDO16360265

Alternate (Facility Name) Address City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Acetone

WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone

Flammable Solvent

UN1090

F003

UN or NA Number

EPA HW Number

ID U-002

WEIGHT FOR D.O.T. USE 19.200

LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. DR GAL.

QUANTITY OF WASTE DELIVERED 003000

1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature) E. S. Holstein

DATE: April 5, 1982

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ronald Brungiwater (Authorized Signature)

DATE: 04 / 05 / 82

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 04 / 05 / 82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

To #85110 T-63 6PM 4.5.82

003083

STATE OF ILLINOIS

0418436

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST

Authorization Number 997796

PFANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370

0971900002

(Company Name) Address Phone Number 14 Generator Number 24 City State Zip EPA Number Waultegan, IL 60085 ILD005203476

WASTE HAULER(S)

MR. FRANK, INC. 201 W. 155th St.

S.W.H. Registration Number 0079027

Hauler Name Hauler Address So. Holland, IL

(312) 596-3377 Phone Number

ILD069506160 EPA Number

Hauler Name Hauler Address

S.W.H. Registration Number 32 EPA Number 38

Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES, INC., 420 So. Colfax

91808902

(Facility Name) Address

Griffith, IN 46319 (219) 924-4370

IND016360265 EPA Number

City State Zip Phone Number

Alternate (Facility Name) Address 39 Site Number 46

City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Acetone

WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DDT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone

Flammable Solvent

UN 1090 UN or NA Number ID U-002

F 0 0 3 EPA HW Number

WEIGHT FOR D.O.T. USE (LBS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature) E. S. Holstein

DATE: May 6, 1982

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ronald Bridgewater (Authorized Signature)

DATE: 05/06/82

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 05/06/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To # 85 till 5.6.82 GRM

003684

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0418439

Authorization Number 997796
8 13

PFANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370 0971900002
(Company Name) Address Phone Number 14 Generator Number 24

Waukegan IL 60085 IL D005203476
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. 201 W. 155th St. So. Holland, IL (312) 596-3377
Hauler Name Hauler Address Phone Number
S.W.H. Registration Number 0079019
25 31
EPA Number IL D 069506160

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 32 38

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services, Inc. 420 So. Colfax 91808902
(Facility Name) Address 39 Site Number 46

Griffith, IN 46319 (219) 924-4370 IN D016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION: Waste Acetone HAZARD CLASS: Flammable Solvent

UN 1090 F 003
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE 1 TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 4500 1 1 (Circle One) 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E.S. Holstein DATE May 13, 1982
(Authorized Signature) E.S. Holstein

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Chorucki DATE 05/13/82
(Authorized Signature) 54 59

(2) _____ DATE _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY: _____ HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. DATE 05/13/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: BDD / 424-BB02 or 202 / 426-2675
DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

TO 120R T-63 62M 51382

003085

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0418440

Authorization Number 997796
8 13

PFANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370 0971900002
(Company Name) Address Phone Number 14 Generator Number 24
Waukegan IL 60085 I L D 005203476
City State Zip EPA Number

WASTE HAULER(S)

Mr Frank, Inc. 201 W. 155th St. (312) 596-3377 0079019
Hauler Name Hauler Address S.W.H. Registration Number 25
So. Holland, IL Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services, Inc. 420 So. Celfax 91808902
(Facility Name) Address 39 Site Number 46
Griffith IN 46319 (219) 924-4370 I N D 016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME Acetone WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone

Flammable Solvent

UN1090
UN or NA Number

F003
EPA HW Number

WEIGHT FOR D.O.T. USE 21,780 TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 003,300 1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS _____) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

E. S. Holsten
(Authorized Signature)

DATE: June 3, 1982

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Mike Pifer
(Authorized Signature)
(2) _____
(Authorized Signature)

DATE: 06/03/82
54 59
DATE: _____
60 65

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

F. D. Duffee
(Authorized Signature)

DATE: 06/03/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To # 8 Still T-63 6.3.82

003686

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0418441

Authorization Number 9 9 7 7 9 6
8 13

PFANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370 0 9 7 1 9 0 0 0 0 2 G
(Company Name) Address Phone Number 14 Generator Number 24
Waukegan IL 60085 I L D 0 0 5 2 0 3 4 7 6
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. 201 W. 155th St. S.W.H. Registration Number 0 0 7 9 0 1 9
Hauler Name Hauler Address 25 31
So. Holland, IL (312) 596-3377 I L D 0 6 9 5 0 6 1 6 0
Hauler Name Hauler Address Phone Number EPA Number

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 32 38

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services, Inc. 420 So. Colfax 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith IN 46319 (219) 924-4370 I N D 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: **Acetone** WASTE PHASE: **Liquid**
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: **Waste Acetone** HAZARD CLASS: **Flammable Solvent** U N 1 0 9 0 F 0 0 3
UN or NA Number EPA HW Number
WEIGHT FOR D.O.T. USE 26,400 1 TDNS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. **ID U-002** QUANTITY OF WASTE DELIVERED 0 0 4 0 0 0 1 GALLONS (Circle One)
D.O.T. USE TDNS (circle one) CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED CU. YDS. 47 52 2 CU. YDS. 53
METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E.S. Holstein DATE June 9, 1982
(Authorized Signature) E.S. Holstein

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) CE Wilburn DATE 0 6 / 0 9 / 8 2
(Authorized Signature) 54 59
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY: _____ HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.
J. Wolfe DATE 0 6 / 0 9 / 8 2
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

To 120 K T-63 GRM 6.9.82

003687

STATE OF ILLINOIS

TO BE COMPLETED BY
WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

043593

Authorization Number 9 9 7 7 9 6
6 13

PFANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370 0 9 7 1 9 0 0 0 2
(Company Name) Address Phone Number 14 Generator Number 24

Waukegan IL 60085 I L D 0 0 5 2 0 3 4 7 6
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frank, Inc., 201 W. 155th St. S.W.H. Registration Number 0 0 7 9 0 0 /
Hauler Name Hauler Address 25 31
So. Holland, IL (312) 596-3377 I L D 0 6 9 5 0 6 1 6 0
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services, Inc. 420 S. Colfax 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46

Griffith IN 46319 (219) 924-4370 IN D 0 1 6 3 6 0 2 5 5
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone Flammable Solvent

U N 1 0 9 0
UN or NA Number

F 0 0 3
EPA HW Number

ID-U-002

WEIGHT FOR D.O.T. USE LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. DR GAL.

QUANTITY OF WASTE DELIVERED: 003000 1 GALLONS (Circle One)
47 52 2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Edward S. Holstein
(Authorized Signature) E S Holstein

DATE: July 2, 1982

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Mike Lipin
(Authorized Signature)

DATE 0 7 / 0 2 / 8 2
34 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE 0 7 / 0 2 / 8 2
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To #8 Still T-63 6PM 7-2-82

003688

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0435932

Authorization Number ~~9 9 7 7 9 6~~

PfANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312)623-0370 0 9 7 1 9 0 0 0 0 2 G
(Company Name) Address Phone Number 14 Generator Number 24

Waukegan IL 60085 I L D O 0 5 2 0 3 4 7 6
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. 201 W. 155th St. So. Holland IL S.W.H. Registration Number 0079001
Hauler Name Hauler Address Phone Number EPA Number

(312) 596-3377 I L D O 6 9 5 0 6 1 6 0
Phone Number EPA Number

Hauler Name Hauler Address Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical, Inc. 420 S. Colfax 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46

Griffith IN 46319 (219) 924-4370 I N D O 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone Flammable Solvent

U N 1 0 9 0 F 0 0 3
UN or NA Number EPA HW Number

WEIGHT FOR D.D.T. USE LBS WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 403000 1 GALLONS (Circle One) 2 CU. YDS. 1
Tons (circle one) 52 53

METHOD OF SHIPMENT (Circle One) (DRUMS _____) TANK TRUCK OPEN TRUCK OTHER (Specify) _____
Number

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E.S. Holstein DATE: July 9, 1982
(Authorized Signature) F.S. Holstein

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [Signature] DATE 07/09/82
(Authorized Signature) 54 59

(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. [Signature] DATE: 07/09/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 * 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS * OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO #85111 T-63 6PM 7.9.82

003689

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0435936

Authorization Number 8 13

PFANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370

0 9 7 1 9 0 0 0 0 2 G
14 Generator Number 24

Waukegan, IL 60085

IL D 0 0 5 2 0 3 4 7 6
EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. 201 W. 155th St., So. Holland, IL

S.W.H. Registration Number **0 0 7 9 0 1 9**
25 31

(312) 596-3377
Phone Number

IL D 0 6 9 5 0 6 1 6 0
EPA Number

Hauler Name Hauler Address

S.W.H. Registration Number 32 38

Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical, Inc. 420 So. Colfax

9 1 8 0 8 9 0 2
39 Site Number 46

Griffith, IN 46319 (219) 924-4370

IND 0 1 6 3 6 0 2 6 5
EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: **Acetone**

WASTE PHASE: **Liquid**

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone

Flammable Solvent

U N 1 0 9 0
UN or NA Number

F 0 0 3
EPA HW Number

WEIGHT FOR
D.D.T. USE

1 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

ID U-002
QUANTITY OF WASTE DELIVERED: **0 0 4 5 0 0**
47 52

1 GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

E. S. Holstein
(Authorized Signature) **E. S. Holstein**

DATE: **July 21, 1982**

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) *Tom Berry*
(Authorized Signature)

DATE: **0 7 / 2 1 / 8 2**
54 59

(2) _____
(Authorized Signature)

DATE: ____ / ____ / ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

H. Schmidt
(Authorized Signature)

DATE: **0 7 / 2 1 / 8 2**
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 120 E 7-63 GRM 7.21.82

003690

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0435938

Authorization Number 8 13

PANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370 0 9 7 1 0 0 0 0 2 G
(Company Name) Address Phone Number 14 Generator Number 24
Waukegan Illinois 60085 I L D 0 0 5 2 0 3 4 7 6
City State Zip EPA Number

WASTE HAULER(S)

MR. FRANK, INC. 201 W. 155th St. S.W.H. Registration Number 0 0 7 9 0 26
Hauler Name Hauler Address 25 31
South Holland, IL (312) 596-3377 I L D 0 6 9 5 0 6 1 6 0
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES, INC., 420 S. Colfax 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith IN 46319 (219) 942-4370 I N D 0 1 6 3 6 8 2 6 5
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: **Acetone** WASTE PHASE: **Liquid**
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone

Flammable

U N 1 0 9 0
UN or NA Number

F 0 0 3
EPA HW Number

WEIGHT FOR
D.O.T. USE

23640 (BS)
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: **004000**
47 52

1 **0000** (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) **TANK TRUCK** OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

E.S. Holstein
E.S. Holstein (Authorized Signature)

DATE: **Aug. 12, 1982**

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) *[Signature]*
(Authorized Signature)

DATE **0 8 / 1 2 / 8 2**
54 59

(2) _____
(Authorized Signature)

DATE **0 8 / 1 2 / 8 2**

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: **0 8 / 1 2 / 8 2**
60 65

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 120 F T-63 60M 8-12-82

003091

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0435940

Authorization Number 8 13

PFANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370 0 9 7 1 9 0 0 0 0 2 G
(Company Name) Address Phone Number 14 Generator Number 24
Waukegan, IL 60085 I L D 0 0 5 2 0 3 4 7 6
City State Zip EPA Number

WASTE HAULER(S)

MR. FRANK, INC. 201 W. 155th St. 0 0 7 9 0 2 6
Hauler Name Hauler Address S.W.H. Registration Number 25 31
So. Holland, IL (312) 596-3377 I L D 0 6 9 5 0 6 1 6 0
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES, INC., 420 So. Colfax 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith, IN 46319 (219) 942-4370 I N D O 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: **Acetone** WASTE PHASE: **Liquid**
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: HAZARD CLASS:

Waste Acetone

Flammable

UN 1-09-0
UN or NA Number

P 0 0 3
EPA HW Number

WEIGHT FOR D.O.T. USE 26,400 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004000 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E. S. Holstein DATE: Aug. 18, 1982
(Authorized Signature) **E. S. Holstein**

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [Signature] DATE: 08 / 18 / 82
(Authorized Signature) 54 59
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.
[Signature] DATE: 08 / 18 / 82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

To 2077-63 6PM 8.18.82

003542

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0435943

Authorization Number 8 13

PFANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370 0 9 7 1 9 0 0 0 2 G
(Company Name) Address Phone Number 14 Generator Number 24
Waukegan, IL 60085 I L D 0 0 5 2 0 3 4 7 6
City State Zip EPA Number

WASTE HAULER(S)

MR. FRANK, INC. 201 W. 155th St. S.W.H. Registration Number 0 0 7 9 0 2 D
Hauler Name Hauler Address 25 31
So. Holland, IL (312) 596-3377 I L D 0 6 9 5 0 6 1 6 0
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES, INC., 420 So. Colfax 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith, IN 46319 (219) 942-4370 I N D 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: **Acetone** WASTE PHASE: **Liquid**
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone

Flammable

U N 1 0 9 0
UN or NA Number

F 0 0 3
EPA HW Number

WEIGHT FOR D.O.T. USE **19,800** LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: **003000** 1 GALLONS (Circle One) 2 CU. YDS. 1
47 52 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) **TANK TRUCK** OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

E. S. Holstein
(Authorized Signature) **E. S. Holstein**

DATE: **Sept. 15, 1982**

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) *Ronald Bridgman*
(Authorized Signature)

DATE: **09 / 15 / 82** 54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

J. Dunfee
(Authorized Signature)

DATE: **9 15 82** 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

To # 8'S.H.W T-63 GEM 9.15.82

003693

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0435944

Authorization Number 8 13

PFANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370 0 9 7 1 9 0 0 0 2 G
(Company Name) Address Phone Number 14 Generator Number 24
Waukegan, IL 60085 I L D O 0 5 2 0 3 4 7 6
City State Zip EPA Number

WASTE HAULER(S)
MR. FRANK, INC. 201 W. 155th St. (312) 596-3377 0 0 7 9 0 2 7
Hauler Name Hauler Address Phone Number S.W.H. Registration Number 25 31
So. Holland, IL I L D O 6 9 5 0 6 1 6 0
Hauler Name Hauler Address Phone Number S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICES, INC., 420 So. Colfax 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith, IN 46319 (219) 942-4370 I N D O 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR
WASTE NAME: **Acetone** WASTE PHASE: **Liquid**
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: HAZARD CLASS:
Waste Acetone Flammable U N 1 0 9 0 F 0 0 3
UN or NA Number EPA HW Number
WEIGHT FOR D.O.T. USE **20400** LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: **003000** 1 GALLONS (Circle One) 2 CU. YDS. **1**
METHOD OF SHIPMENT (Circle One) (DRUMS Number) **TANK TRUCK** OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION *E. S. Holstein* DATE: **Sept. 21, 1982**
(Authorized Signature) **E. S. Holstein**

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.
(1) *Ronald Bridgman* DATE: **9/21/82**
(Authorized Signature) 54 59
(2) DATE: **9/21/82**
(Authorized Signature)

DISPSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
[Signature] DATE: **9/21/82**
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0435949

Authorization Number 8 13

PFANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370

0 9 7 1 9 0 0 0 0 2

(Company Name) Address Phone Number Generator Number
Waukegan, IL 60085 **ILD 005 203 476**

City State Zip EPA Number

WASTE HAULER(S) **ICC 2980**

LANDGREBE 3009 So. Shields, Chicago, IL

S.W.H. Registration Number **4649**

Hauler Name Hauler Address Phone Number
LANDGREBE 3009 So. Shields, Chicago, IL 842-3121
IND 009842824

Hauler Name Hauler Address Phone Number S.W.H. Registration Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE, 420 So. Colfax

91808902

(Facility Name) Address Site Number
Griffith, IN 46319 312268340 IND 016560265

City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: **Tetrahydrofuran** WASTE PHASE: **Liquid**

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION: HAZARD CLASS:

Waste Tetrahydrofuran Flammable Solvent

UN 1993
UN or NA Number

D 0 0 1
EPA HW Number

WEIGHT FOR D.O.T. USE **15,500** **LBS** TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED **1550** **GALLONS** (Circle One) **1**

METHOD OF SHIPMENT (Circle One) **(DRUMS 31)** TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

E. S. Holstein
(Authorized Signature) **B. S. Holstein**

DATE: **Sept. 10, 1982**

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) **Landgrebe**
(Authorized Signature)

DATE **9-17-82**

(2) _____
(Authorized Signature)

DATE _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Landgrebe
(Authorized Signature)

DATE **9-13-82**

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

*On dock 9.13.82
To 204 RT-506RM 10.2.82*

003695

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0435941

Authorization Number 8 13

PFANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370 09 71 9 00002 G
(Company Name) Address Phone Number 14 Generator Number 24
Waukegan, IL 60085 I L D 0 0 5 2 0 3 4 7 6
City State Zip EPA Number

WASTE HAULER(S)

MR. FRANK, INC. 201 W. 155th St. S.W.H. Registration Number 00 79 027
Hauler Name Hauler Address 25 31
So. Holland, IL (312) 596-3377 I L D 0 6 9 5 0 6 1 6 0
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES, INC., 420 so. Colfax 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith, IN 46319 (219) 596-4370 I N D 0 1 6 3 6 0 2 5 5
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: **Acetone** WASTE PHASE: **Liquid**
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: **Waste Acetone** HAZARD CLASS: **Flammable** U N 1 0 9 0 F 0 0 3
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE **20,400** **Estimated** LBS **234** WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL QUANTITY OF WASTE DELIVERED: **003000** 1 GALLONS (Circle One) 1
D.T. USE TONS (circle one) CONVERTED TO CU. YDS. OR GAL 47 52 2 CU YDS. 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) **TANK TRUCK** OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION **E. S. Holstein** DATE: **Oct. 7, 1982**
(Authorized Signature) E. S. Holstein

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) **Ronald Bridgewater** DATE: **10 / 07 / 82**
(Authorized Signature) 54 59

(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE
Wunfee DATE: **10 07 82**
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 - GENERATOR

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0435945

Authorization Number 000000

PFANSTIEHL LABORATORIES INC., 1219 Glen Rock Ave. (312) 623-0370 0 9 7 1 9 0 0 0 2
(Company Name) Address Phone Number 14 Generator Number 24

Waukegan, IL 60085 I L D 0 0 5 2 0 3 4 7 6
City State Zip EPA Number

WASTE HAULER(S)

MR. FRANK, INC. 201 W. 155th St. S.W.H. Registration Number 0 0 7 9 0 0
Hauler Name Hauler Address 25 31
So. Holland, IL (312) 596-3377 I L D 0 6 9 5 0 6 1 6 0
Phone Number EPA Number

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES, INC., 420 So. Colfax 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46

Griffith, IN 46319 (219) 942-4370 I N D 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46

City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: **Acetone** WASTE PHASE: **Liquid**

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION: **Waste Acetone** HAZARD CLASS: **Flammable** **UN 1090** **F 603**
UN or NA Number EPA HW Number

WEIGHT FOR D.D.T. USE **20,400** LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: **003,000** 1 GALLONS (Circle One) 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) **TANK TRUCK** OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION *E. S. Holstein* DATE: **Nov. 3, 1982**
(Authorized Signature) E. S. Holstein

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) *Mike Guff* DATE **11 / 03 / 82**
(Authorized Signature) 54 59

(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE OR TREATMENT FACILITY HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. DATE **11 / 03 / 82**
(Authorized Signature) 50 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

To # 7 still T-63 60M 11.3.82

003597

STATE OF ILLINOIS

0435946

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number 8 13

PFFANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370
Waukegan, IL 60085
I L D 0 0 5 2 0 3 4 7 6

WASTE HAULER(S)

MR. FRANK, INC. 201 W. 155th St.
So. Holland, IL (312) 596-3377
I L D 0 6 9 5 0 6 1 6 0

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES, INC., 420 So. Colfax
Griffith, IN 46319 (219) 942-4370
I N D O 1 6 3 6 0 2 6 5

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Acetone WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION: Waste Acetone HAZARD CLASS: Flammable UN 1090 EPA HW Number F 003

WEIGHT FOR D.O.T. USE 20,400 LBS QUANTITY OF WASTE DELIVERED 003000

METHOD OF SHIPMENT (Circle One) TANK TRUCK

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E. S. Holstein Nov. 12, 1982

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Tom Berry DATE 11/12/82
(2) DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. DATE 11/12/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

To #7 Still T-63 CPM 11.12.82

003698

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0435947
7

Authorization Number 8 13

PFANSTIEHL LABORATORIES, INC., 1219 Glen Rock Ave. (312) 623-0370
(Company Name) Address Phone Number

0971900002
14 Generator Number 24

Waukegan, IL 60085-0439
City State Zip

ILD005203476
EPA Number

WASTE HAULER(S)

MR. FRANK, INC. 201 W. 155th St.
Hauler Name Hauler Address
So. Holland, IL

S.W.H. Registration Number **0079001**
25 31

(312) 596-3377
Phone Number

ILD069506160
EPA Number

Hauler Name Hauler Address

S.W.H. Registration Number 32 38

Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES, INC., 420 So. Colfax
(Facility Name) Address

91808902
39 Site Number 46

Griffith, IN 46319 (219) 942-4370
City State Zip Phone Number

IND016360265
EPA Number

Alternate (Facility Name) Address

39 Site Number 46

City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: **Acetone** WASTE PHASE: **Liquid**

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW
(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION: HAZARD CLASS:

Waste Acetone

Flammable

UN1090
UN or NA Number

F003
EPA HW Number

WEIGHT FOR D.O.T. USE **20,400** LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: **40,300.0** 1 GALLONS (Circle One) 2 CU. YDS. **1**

METHOD OF SHIPMENT (Circle One) (DRUMS Number) **TANK TRUCK** OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

E. S. Holstein (Authorized Signature) **E. S. Holstein**

DATE **Dec. 2, 1982**

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) *Mike Gipe* (Authorized Signature)

DATE **12 / 02 / 82**

(2) (Authorized Signature)

DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE **12 / 02 / 82**

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

To # 7 Still 7-63 6RM 12.2.82

003679

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0462897

Authorization Number 921892
8 13

PHILLIPS MFG. CO. 7334 N. CLARK (312) 338-6200 0316 001005
(Company Name) Address Phone Number 14 Generator Number 24
CHICAGO ILL. 60626 ILD005474143
City State Zip EPA Number

WASTE HAULER(S)
AMERICAN CHEMICAL SVC. 420 S. COLFAX S.W.H. Registration Number IND0016360265
Hauler Name Hauler Address 25 31
GRIFFITH, IND (312) 768-3400 EPA Number
Phone Number
STRAND TRUCKING 13642 KENTON S.W.H. Registration Number 0311004
Hauler Name Hauler Address 32 38
312-385-8440 Phone Number ILT000646810
EPA Number

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SVC. 420 S. COLFAX 918 08902
(Facility Name) Address 39 Site Number 46
GRIFFITH IND. 46319 (312) 768-3400 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR
WASTE NAME: PORCHWROETHYLENE WASTE PHASE: LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
(Liquid, Gaseous, Solid)
SHIPPING DESCRIPTION: HAZARDOUS WASTE, LIQUID, NUC HAZARD CLASS: ORME
UN or NA Number: NA9189 EPA HW Number: F001
WEIGHT FOR D.O.T. USE: 36652 LBS (circle one) TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 2695 GAL 1 GALLONS (Circle One) CU. YDS. 1
METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify) 3355 VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
Martin Ole DATE: 7/7/82
(Authorized Signature)

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) Stan Strand DATE: 07/07/82
(Authorized Signature) 54 59
(2) DATE: 07/07/82
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE
Martin Ole DATE: 0707/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0462898

Authorization Number 921592

PHILIPS MFG CO 7334 N. CLARK (312) 338-6200 0.316 001 005
(Company Name) Address Phone Number Generator Number
CHICAGO ILL 60626 ICD 005 4741 YS
City State Zip EPA Number

WASTE HAULER(S)

AMERICAN CHEMICAL 420 S. COLFA S.W.H. Registration Number 25
Hauler Name Hauler Address EPA Number
GRIFITH, INC. (312) 768-3400 IND 016360265
Phone Number EPA Number
STAND TRUCKING 13642 KENTON S.W.H. Registration Number 32
Hauler Name Hauler Address Phone Number EPA Number
312-385-8440 LLT 000646810
Phone Number EPA Number

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL CO. 420 S. COLFA 918 08 902
(Facility Name) Address Site Number
GRIFITH IND. 46319 (312) 768-3400 IND 016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: TRICHLOROETHYLENE WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
(Liquid, Gaseous, Solid)
SHIPPING DESCRIPTION: WASTE TRICHLOROETHYLENE HAZARD CLASS: ORMA
(201000-454) UN1710 F001
UN or NA Number EPA HW Number
WEIGHT FOR D.D.T. USE: 8250 (LBS) (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 660 GAL 1
GALLONS (Circle One) 2 CU. YDS. 53
METHOD OF SHIPMENT (Circle One) (DRUMS 12) TANK TRUCK OPEN TRUCK OTHER (Specify) VAX
Number

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [Signature] DATE: 7/1/82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature] DATE: 07/07/82
(Authorized Signature) 54 59
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 07/07/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 7-7-82 TO IAKT-63
GIM 8-9-82

003701

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0482436

Authorization Number 997209

PLAYSKOOL INC. 4501 AUGUSTA BLVD. 276-6700 0316000348
(Company Name) Address Phone Number Generator Number
CHICAGO ILL 60651 ILD005122163
City State Zip EPA Number

WASTE HAULER(S)

MR. FRANK Co. 201 W. 155TH ST. 0079
Hauler Name Hauler Address S.W.H. Registration Number
SOUTH HOLLAND, ILL 60473 ILD069506160
Hauler Name Hauler Address S.W.H. Registration Number
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL GRIFFITH, INDIANA 31808902
(Facility Name) Address Site Number
IND.016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: DIRTY THINNER WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

LACTOL SPIRITS FLAMMABLE

1993

UN or NA Number

EPA HW Number

WEIGHT FDR LBS WEIGHT FDR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 045000 1 GALLONS (Circle One)
D.O.T. USE TONS (circle one) CONVERTED TO CU. YDS. DR GAL CU. YDS. 1
52 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

F-005

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

[Signature]
(Authorized Signature)

DATE: 4-28-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [Signature]
(Authorized Signature)
(2) _____
(Authorized Signature)

DATE: 04 28 82
DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[Signature]
(Authorized Signature)

DATE: 04 28 82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

T0126K T-63 6PM 4-28-82

003702

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0633477

TO BE COMPLETED BY
WASTE GENERATOR

Authorization Number 997209

PLAYSKOOL INC. 4501 AUGUSTA BLVD 312-276-6700 0316000348
(Company Name) Address Phone Number Generator Number
CHICAGO ILLINOIS 60651 IL0005122163
City State Zip EPA Number

WASTE HAULER(S)

MR. FRANK CO. 201 W. 155TH ST. S.W.H. Registration Number 0079029
Hauler Name Hauler Address
SO. HOLLAND, ILL. 3125963377 IL0069506160
#60473 Phone Number EPA Number

Hauler Name Hauler Address Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL GRIFFITH INDIANA 918085021
(Facility Name) Address Site Number
CROSS COLFAX #46319 312-768-3400 IND. 016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: DIRTY THINNER WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: LACTOL SPIRITS HAZARD CLASS: FLAMMABLE UN or NA Number: 1993 EPA HW Number: P005

WEIGHT FOR D.D.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005000 0 GALLONS (Circle One) 1 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS _____) (TANK TRUCK) OPEN TRUCK OTHER (Specify) _____
F-005 Number

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION J.W. Henshit DATE: 5-24-82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Robert Beckman DATE: 05/24/82
(Authorized Signature) (54) (59)
(2) _____ DATE: 1/1/
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: Thompson DATE: 5/24/82
(Authorized Signature) (60) (65)

COMMENTS OR SPECIAL INSTRUCTIONS

STATE OF ILLINOIS

0633476

TO BE COMPLETED BY
WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

Authorization Number ~~XXXXXXXXXX~~

SPECIAL WASTE HAULING MANIFEST - GEN

0316000348
ILD 005122163

PLAYSKOOL INC.
(Company Name)

4501 AUGUSTA BLVD. 312-276-6700
Address Phone Number

CHICAGO
City

ILLINOIS 60651
State Zip

WASTE HAULER(S)

MR. FRANK CO.
Hauler Name

201 W. 155TH ST.
Hauler Address
So. HOLLAND, ILL. 312-596-3377
60473
Phone Number

S.W.H. Registration Number 0079021

ILD 069506160
EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number EPA Number

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL Co.
(Facility Name)

420 So. COLFAX AVE
Address

91808902
Site Number

GRIFFITH
City

INDIANA
State

46319 312-768-3400
Zip Phone Number

IND. 016360265
EPA Number

Alternate (Facility Name)

Address

39 46
Site Number

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: DIRTY THINNER

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS: F-005

LACTOL SPIRITS FLAMMABLE

1993
UN or NA Number

F 005
EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Rose Bickhoff
(Authorized Signature)

DATE: 10-4-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Tom Berry*
(Authorized Signature)

DATE: 10 04 82

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

A. Draper
(Authorized Signature)

DATE: 10 4 82

COMMENTS OR SPECIAL INSTRUCTIONS:

To 210 K T-50 6RM 10.4

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0491482

Authorization Number 8 998452 13

PRE FINISH METALS 2300 E. PRATT 312 4392210 0314400021
(Company Name) Address Phone Number Generator Number
ELK GROVE VILLAGE IL 60007 IL7180010407
City State Zip EPA Number

MR. FRANK S. HOLLAND, IL 201 W. 155TH ST.
Hauler Name Hauler Address
312 5963377 ILD069506160
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number
Phone Number EPA Number

AMER. CHEM SER 420 S. COLPAX AVE. 91808902
(Facility Name) Address Site Number
GRIFFITH IN. 46317 3127683400 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR
WASTE NAME: WASTE PAINT WASTE PHASE: LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION: HAZARD CLASS: FLAMMABLE UN 1993 FOOS
EPA HW Number

WEIGHT FOR O.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 704000
1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
(Authorized Signature) DATE 5-28-82

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) Miguel Garcia (Authorized Signature) DATE 05/28/82
(2) (Authorized Signature) DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY: HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE
(Authorized Signature) DATE 05/28/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0335285

FID # ILL 082954504

Authorization Number 998763

PRINT FLEX, INC (Company Name) 2375 DELTA LANE Address
ELK GROVE VILLAGE ILL 60007 City State Zip

0314400033 Generator Number

LANDGREBE Hauler Name STATE RD 130 W Hauler Address

ICC 2980 IND 009842824 S.W.H. Registration Number

VALPARAISO, IND. 46393 Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) 420 S. COLFAX Address
GRIFFITH IND. 46319 City State Zip

91808902 Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE INK SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENT HAZARD CLASS: FLAMMABLE
WEIGHT FOR D.O.T. USE: 12,000 LBS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 1650
1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) 30 DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-9-82 Paul R Addison (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) P. Schumacher (Authorized Signature)
(2) (Authorized Signature)

DATE: 21 91 82
DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 27 10 82

COMMENTS OR SPECIAL INSTRUCTIONS:

On dock 2/10/82
6RM To 210 R T-50
6RM

SITE COPY - PART 3

003706

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0146616

5-11-82
FIB # ILD 052954504

Authorization Number 992763

1 Print Flex Inc. 2375 Delta Lane
(Company Name) Address

EK Grove Village Illinois 60007
City State Zip

15-11-82
0314400033
Generator Number

WASTE HAULER(S)

ICC 2980

(1) Landgrebe State Rd. 180 W
Hauler Name Hauler Address

Ind. 009842824
S.W.H. Registration Number

(2) Vulpuraiso Ind 46393
Hauler Name Hauler Address

S.W.H. Registration Number 32

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 S. Colfax
(Facility Name) Address

91808902
Site Number

Griffith Indiana 46319
City State Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Waste Ink Solvents

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:
Waste Solvent

HAZARD CLASS:
Flammable

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-8-82

Paul R. Addison
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 1815
47 52 53

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) 33 DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)

DATE: 4-13-82
24 59

(2) [Signature]
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[Signature]
(Authorized Signature)

DATE: 4-14-82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

TOOIO R - TSO GRM 4/15/82

003707

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0146617

FID# ILD 082954504

Authorization Number ~~998763~~

PRINT FLEX
(Company Name)
2375 DELTA LANE
Address
ELK GROVE VILLAGE
City
IL
State
60007
Zip

0374400033
Generator Number

(1) LIND GREDE
Hauler Name
STATE RD. 130 W
Hauler Address

ICC 2980
IND. 009842824
S.W.H. Registration Number

(2) VALPARAISO IND. 46393
Hauler Name
VALPARAISO IND. 46393
Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE
(Facility Name)
4205 COLFAX
Address
GRIFFITH
City
INDIANA
State
46319
Zip

91808902
Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE INK SOLVENTS

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

7003

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

WASTE SOLVENT

HAZARD CLASS:

UN1993

FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-23-82

Paul R. Addison
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 275
~~275~~ 0
47 52 53
1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)

DATE: 9-24-82

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[Signature]
(Authorized Signature)

DATE: 9-24-82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

To 204R 7-50 6PM 9-24-82 6PM

003708

STATE OF ILLINOIS

0334020

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 1 4 0

Tel. No. 312-888-7150 PRINTPACK, INC.

1400 ABBOTT DRIVE

FED ILD 089825780

(Company Name)

Address

0 8 9 4 3 8 0 0 1 1 6 Generator Number

ELGIN

ILL.

60120

City

State

Zip

STRAND TRUCKING C/O AMERICAN CHEMICAL

13642 KENTON WOOD, ILL. 60445 420 S. COLFAX

S.W.H. Registration Number 0 0 2 4 0 0 /

Hauler Name

Hauler Address

FED ILT 000646810

S.W.H. Registration Number 32 38

Hauler Name

Hauler Address

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

FED IND 0163602S

AMERICAN CHEMICAL

420 S. COLFAX AVE.

9 1 8 0 8 9 0 2 Site Number

(Facility Name)

Address

GRIFFITH

IND.

46319

City

State

Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

WASTE

DOT ID NO. NA 9189

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

R. Q. HAZARDOUS

WEIGHT FOR D.O.T. USE 16,000 LBS TONS (circle one)

WASTE LIQ. N.O.S.

FLAMMABLE

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 1,100

GALLONS (Circle One) 1 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION, & THE E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/14/81

(Authorized Signature)

WASTE HAULER FED ILT 000646810

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Thomas Paul Strand (Authorized Signature)

DATE: 01 14 83

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 1 14 83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

On dock GRM 1/15/82 To IDS & FED T-63 GRM 1/19/82

SITE COPY - PART 3

003709

STATE OF ILLINOIS

0334023

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 1 4 0

Tel. No. 312-888-7150

PRINTPACK, INC.

1400 ABBOTT DRIVE

FED ILD 089825780

(Company Name)

Address

0 8 9 4 3 8 0 0 1 1 G

ELGIN

ILL.

60120

Generator Number 14 74

City

State

Zip

STRAND TRUCKING CO.

13642 KENTON CRESTWOOD, IL. 60445

AMERICAN CHEMICAL

420 S. COLFAX

S.W.H. Registration Number 0 0 2 4 0 0 /

Hauler Name

Hauler Address

FED ILT 000646810

S.W.H. Registration Number 32 38

Hauler Name

Hauler Address

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

FED IND 0163602S

AMERICAN CHEMICAL

420 S. COLFAX AVE.

9 1 8 0 8 9 0 2

(Facility Name)

Address

Site Number 39 46

GRIFFITH

IND.

46319

City

State

Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

WASTE

DOT ID NO. NA 9189

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

R. Q. HAZARDOUS

WEIGHT FOR D.O.T. USE 32000 LBS TONS (circle one)

WASTE LIQ. N. O. S.

FLAMMABLE

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 0 0 4 4 0 0

1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

80 DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION & THE E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/17/82

Michael Wisney (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature] (Authorized Signature)

DATE: 3/17/82

(2) [Signature] (Authorized Signature)

DATE: [Signature]

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature] (Authorized Signature)

DATE: 3/17/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

To # 1 STW T-63 GRM 3/18/82

SITE COPY - PART 3

003710

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0621540

Authorization Number 9 9 7 1 4 0
8 13

PRINTPACK, INC. 1400 ABBOTT DRIVE 311 2 8 8 8 7 1 5 0 0 8 9 4 3 8 0 0 1 1
(Company Name) Address Phone Number 14 Generator Number 24

ELGIN ILL. 60120 I L D 0 8 9 8 2 5 7 8 0
City State Zip EPA Number

WASTE HAULER(S)

STRAND TRUCKING CO. 13642 KENTON CRESTWOOD, IL. 60445 S.W.H. Registration Number 0 0 2 4 0 0 1
AMERICAN CHEMICAL 420 S. COLFAX Hauler Name Hauler Address 25 31

I L T 0 0 0 6 4 6 8 1 0
EPA Number

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL 420 S. COLFAX AVE. 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46

GRIFFITH IND. 46319 I N D 0 1 6 3 6 0 2 S
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

R. Q. HAZARDOUS

N A 9 1 8 9

EPA HW Number

WASTE LIQ. N.O.S.

FLAMMABLE

UN or NA Number

WEIGHT FOR D.O.T. USE 32000 # LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 4400

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS 80)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND EPA.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

James N. Hoffmeyer
(Authorized Signature)

DATE: 4-27-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) L. Schulz
(Authorized Signature)

DATE: 4/27/82
54 59

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

Michael E. Buege
(Authorized Signature)

DATE: 4/27/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

On dock 4.27.82 To 112 K-636 RW
5-3-82

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0621542

Authorization Number 997 140
8 13

PRINTPACK, INC. 1400 ABBOTT DRIVE 312 888 7150 089 4380 011 G
(Company Name) Address Phone Number 14 Generator Number 24
ELGIN ILL. 60120 IL D 0898 257 80
City State Zip EPA Number

WASTE HAULER(S)

STRAND TRUCKING CO. 13642 KENTON CRESTWOOD, IL. 60445
AMERICAN CHEMICAL 420 S. COLFAX
Hauler Name Hauler Address
S.W.H. Registration Number 00 24001
312 385 8440 IL T 000646810
Phone Number EPA Number
Hauler Name Hauler Address S.W.H. Registration Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL 420 S. COLFAX AVE. 91 80 89 02
(Facility Name) Address 39 Site Number 46
GRIFFITH IND. 46319 312 768 3400 IN D 0163602 S
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

R. Q. HAZARDOUS

NA 91 89
UN or NA Number

F883
EPA HW Number

WASTE LIQ. N.O.S.

FLAMMABLE

WEIGHT FOR
D.O.T. USE

31500 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003850
47 52

GALLONS (circle one)
2 CU.-YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS 70)
Number

TANK TRUCK

OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Michael Morse
(Authorized Signature)

DATE: 6-16-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Stan Stan
(Authorized Signature)

DATE: 6/16/82
54 59

(2) _____
(Authorized Signature)

DATE: 1/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

Michael Bulger
(Authorized Signature)

DATE: 6/16/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0462899

Authorization Number 927892

Phillips Mfg Co 7334 N. Clark (312) 338-6200 0316 0010 056
(Company Name) Address Phone Number Generator Number
Chicago IL 60626 EL0005474143
City State Zip EPA Number

WASTE HAULER(S)

American Chemicals 420 S. Colfax S.W.H. Registration Number _____
Hauler Name Hauler Address
Griffith, IN (312) 768-3400 IND 016360265
Hauler Name Hauler Address Phone Number EPA Number
Stan & Trucking 13647 Henton 312-385-8440 S.W.H. Registration Number 0311004
Hauler Name Hauler Address Phone Number EPA Number
ILT000646810
EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical 420 S. Colfax 918 08902
(Facility Name) Address Site Number
Griffith IN 46319 (312) 768-3400 IND 016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: 1,1,1 TRICHLOROETHANE WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION: WASTE 1,1,1 TRICHLOROETHANE HAZARD CLASS: ORMA
UN or NA Number: UN 2831 EPA HW Number: F001
WEIGHT FOR D.O.T. USE: 2981 LBS (circle one) TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 275 GAL
METHOD OF SHIPMENT (Circle One) (DRUMS 5) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND THE P...
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [Signature] DATE: 7/7/82
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) [Signature] DATE: 07/07/82
(Authorized Signature) (54) (59)
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO XX
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature) DATE: 07/07/82
(60) (65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

Om dock 7.7.82
TO 122 RT-63 GRM 7.8.82

003713

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0621543

Authorization Number 9-97-140

PRINTPACK, INC. 1400 ABBOTT DRIVE 31288871500 894380011
(Company Name) Address Phone Number Generator Number

ELGIN ILL. 60120 ILD089825780
City State Zip EPA Number

WASTE HAULER(S)

STRAND TRUCKING CO. 13642 KENTON CRESTWOOD, IL. 60445
AMERICAN CHEMICAL 420 S. COLFAX
Hauler Name Hauler Address S.W.H. Registration Number 0024001

3123858440 IL000646810
Phone Number EPA Number

Hauler Name Hauler Address Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL 420 SOUTH COLFAX AVENUE 91808902
(Facility Name) Address Site Number

GRIFFITH INDIANA 46319 3127693400 IND01636025
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION: HAZARD CLASS:

R. Q. HAZARDOUS FLAMMABLE N 9189
WASTE LIQ. N.O.S. UN or NA Number

F903
EPA HW Number

WEIGHT FOR D.O.T. USE 30000 BS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004125 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS 75 TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Thomas Strand DATE 7-14-82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) Thomas Paul Strand DATE: 07/14/82
(Authorized Signature)

(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

Michael P. Berg DATE: 7/14/82
(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS:

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0621544

Authorization Number _____
8 _____ 13

PRINTPACK, INC. 1400 ABBOTT DRIVE 3 1 2 8 8 8 7 1 5 0 0 8 9 4 3 8 0 0 1 1 G
 (Company Name) Address Phone Number 14 Generator Number 24

ELGIN ILL. 60120 I L D 0 8 9 8 2 5 7 8 0
 City State Zip EPA Number

WASTE HAULER(S)

STRAND TRUCKING CO. 13642 KENTON CRESTWOOD, IL. 60445
AMERICAN CHEMICAL 420 S. COLFAX
 Hauler Name Hauler Address

S.W.H. Registration Number 0 0 2 4 0 0 2
 25 31

3 1 2 3 8 5 8 4 4 0 I L T 0 0 0 6 4 6 8 1 0
 Phone Number EPA Number

Hauler Name: _____ Hauler Address _____
 Phone Number _____ EPA Number _____

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL 420 SOUTH COLEAX AVENUE 9 1 8 0 8 9 0 2
 (Facility Name) Address 39 Site Number 46

GRIFFITH INDIANA 46319 3 1 2 7 6 8 3 4 0 4 N D 0 1 6 3 6 0 2 5
 City State Zip Phone Number EPA Number

Alternate (Facility Name) _____ Address _____
 City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK & ADHESIVE SOLVENT WASTE WASTE PHASE: LIQUID
 (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

R. Q. HAZARDOUS

FLAMMABLE

WASTE LIQ. N.O.S.

NA 9 1 8 9

UN or NA Number

UN 1993

7003

EPA HW Number

WEIGHT FOR
D.O.T. USE

26400 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: _____
47

3630
52

CALLONS (Circle One)
2 CU. YDS. _____
53

METHOD OF SHIPMENT (Circle One)

(DRUMS 66
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

[Signature]
(Authorized Signature)

DATE: 8-10-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)

DATE: 8/19/82
54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 8/10/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

T0125KT-63 GPM 8.10.82

003715

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0621545

TO BE COMPLETED BY
WASTE GENERATOR

Authorization Number 8 13

PRINTPACK, INC. 1400 ABBOTT DRIVE 312 888 7150 089 438 001 16
(Company Name) Address Phone Number Generator Number
ELGIN ILL. 60120 I L D 08 9825 780
City State Zip EPA Number

WASTE HAULER(S)

STRAND TRUCKING CO. 13642 KENTON CRESTWOOD, IL. 60445
AMERICAN CHEMICAL 420 S. COLFAX
Hauler Name Hauler Address
312-786-3400 312 385 8440
Phone Number
S.W.H. Registration Number 0024001
EPA Number I L T 000 64 6 81 0

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL 420 SOUTH COLFAX AVENUE 91808902
(Facility Name) Address Site Number
GRIFFITH INDIANA 46319 312 786 3400 I N D 01 63 6 0 2 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: **INK & ADHESIVE SOLVENT WASTE**

WASTE PHASE: **LIQUID**

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

R.Q. HAZARDOUS

NA 9189

1993

WASTE LIQ. N.O.S.

FLAMMABLE

UN or NA Number

EPA HW Number

WEIGHT FOR D.D.T. USE

34650

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 47

4235

1 GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS 77) Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

UAXI

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND EPA.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

James N. Montefield
(Authorized Signature)

DATE: 9-9-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) *Steve Strawn*
(Authorized Signature)

DATE: 9/9/82

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael C. Burg
(Authorized Signature)

DATE: 9/9/82

COMMENTS OR SPECIAL INSTRUCTIONS:

On dock 9.9.82
To 126 RT-636EM 9.10.82

003716

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0621546

Authorization Number 8 13

PRINTPACK, INC. 1400 ABBOTT DRIVE 3 1 2 8 8 8 7 1 5 0 0 8 9 4 3 8 0 0 1 1 G
(Company Name) Address Phone Number Generator Number 24
ELGIN ILL. 60120 I L D 0 8 9 8 2 5 7 8 0
City State Zip EPA Number

WASTE HAULER(S)

STRAND TRUCKING CO. 13642 KENTON CRESTWOOD, IL. 60445
AMERICAN CHEMICAL 420 S. COLFAX S.W.H. Registration Number 0 0 2 4 0 0 2
Hauler Name Hauler Address 25 31
(312) 786-3400 3 1 2 3 8 5 8 4 4 0 I L T 0 0 0 6 4 6 8 1 0
Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL 420 SOUTH COLFAX AVENUE 9 1 8 0 8 9 0 2
(Facility Name) Address Site Number 39 46
GRIFFITH INDIANA 46319 3 1 2 7 8 6 3 4 0 0 I N D O 1 6 3 6 0 2 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number 39 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR *

WASTE NAME: INK & ADHESIVE SOLVENT WASTE

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

R.Q. HAZARDOUS

NA 9 1 8 9

F003

WASTE LIQ. N.O.S.

FLAMMABLE

UN or NA Number

EPA HW Number

WEIGHT FOR D.D.T. USE 30,400 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003685 GALLONS (Circle One)
CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS 76)
Number

TANK TRUCK

OPEN TRUCK

(OTHER (Specify) VAN)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Michael D. Moore
(Authorized Signature)

DATE: 10-12-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) R. Lusk
(Authorized Signature)

DATE: 10/12/82
54 59

(2) _____
(Authorized Signature)

DATE: 1 1 1

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael D. Moore
(Authorized Signature)

DATE: 10/12/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

DUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 124 K T-63 GRM 10-12-82

003717

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0621547
7

Authorization Number 8 13

PRINTPACK, INC. 1400 ABBOTT DRIVE 3 1 2 8 8 7 1 5 0 0 8 9 4 3 8 0 0 1 1 G
(Company Name) Address Phone Number T4 Generator Number 24
ELGIN ILL. 60120 I L D 0 8 9 8 2 5 7 8 0
City State Zip EPA Number

WASTE HAULER(S)

STRAND TRUCKING CO. 13642 KENTON CRESTWOOD, IL. 60445 S.W.H. Registration Number 0 0 2 4 0 0 /
AMERICAN CHEMICAL 420 S. COLFAX Hauler Address 25 31
(312) 786-3400 3 1 2 3 8 5 8 4 4 0 I L T 0 0 0 6 4 6 8 1 0
Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL 420 SOUTH COLFAX AVENUE 9 1 8 0 8 9 0 2
(Facility Name) Address 39 46
GRIFFITH INDIANA 46319 31 2 7 8 6 3 4 0 0 I N D 0 1 6 3 6 0 2 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: **INK & ADHESIVE SOLVENT WASTE** WASTE PHASE: **LIQUID**
(Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DDT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: **R. Q. HAZARDOUS WASTE LIQ. N.O.S.** HAZARD CLASS: **FLAMMABLE**
UN or NA Number: **NA 9189** EPA HW Number: **F003**
WEIGHT FOR D.D.T. USE **26.000** TONS (circle one) **LB** WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: **003575** GALLONS (Circle One) **0** 2 CU. YDS. 53
METHOD OF SHIPMENT (Circle One) (DRUMS **45**) TANK TRUCK OPEN TRUCK OTHER (Specify) **VAH**

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION E.W. Burnidge DATE 11-9-82
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Steve Stein DATE 11/9/82
(Authorized Signature) 54 59
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.
Michael E. Bunge DATE 11/9/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

HAZARDOUS WASTE MANIFEST

147330

031281
MANIFEST DOCUMENT NUMBER
20319

Landgrebe Motor Transport

SHIPPER NUMBER

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND 039339759	QMS, 270 Westmeadow Place, P.O. Box 325 Lowell, IN 46356 (219) 696-7777 1334	
TRANSPORTER # 1	IND 009842824	Landgrebe Motor transport, P.O. Box 32 Valparaiso, IN 46383 (219) 464-4181 147332	
TRANSPORTER # 2 (if required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service, P.O. Box 190, 420 S. Colfax Griffith, IN 46319 (219) 924-4370 491 147333	3/15/82
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
8 drums		F005	Flammable Solvent NOS	UN 1993			55 gal each	4000 lbs. (440 gal.)		147331

SPECIAL HANDLING INSTRUCTIONS
FREIGHT PREPAID

If an RO commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID except when box at right is checked Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

20701
MANIFEST DOCUMENT NUMBER

Landgrebe Motor Transport

SHIPPER NUMBER

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND 039339759	AMS, 270 Westmeadow Place, P.O. Box 325 Lowell, IN 46356 (219) 696-7777	
TRANSPORTER # 1	IND 009842824	Landgrebe Motor Transport, P.O. Box 32 Valparaiso, IN 46383 (219) 464-4181	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service, P.O. Box 190 420 S. Colfax, Griffith, IN 46319 (219) 924-4370	7/2
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
16 drums		F005	Flammable Solvent NOS	UN 1993			55-gal each	880 gal 8000 lbs.		

SPECIAL HANDLING INSTRUCTIONS

FREIGHT PREPAID

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Am: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID except when box is checked Check box if charges are to be collected

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

20902

MANIFEST DOCUMENT NUMBER

Landgrebe Motor Transport

SHIPPER NUMBER

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND 039339759	QMS, P.O. Box 325, 270 Westmeadow Place Lowell, IN 46356 (219) 696-7777	
TRANSPORTER # 1	INR 009842824	Landgrebe Motor Transport, P.O. Box 32 Valparaiso, IN 46383 (219) 464-4181	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	INA 016360265	American Chemical Service, P.O. Box 190 420 S. Colfax, Griffith, IN 46319 (219) 924-4370	<i>9/8/82</i>
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	ALTERNATE		

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
gdrums		F005	Flammable Solvent NOS	UN 1993			55-gal each	495 gal (3600#)		

SPECIAL HANDLING INSTRUCTIONS

FREIGHT PREPAID

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is 'carrier's or shipper's weight.'" Signature _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. (Signature of Consignor) _____

TOTAL CHARGES: \$ FREIGHT CHARGES FREIGHT PREPAID except when box at right is checked Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)
This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

5

HAZARDOUS WASTE MANIFEST

21107

MANIFEST DOCUMENT NUMBER

11/5/82

SHIPPER NUMBER

Landgrebe Motor Transport

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND 039339759	QMS, P.O. Box 325, 270 Westmeadow Place Lowell, IN 46356 (219) 696-7777	
TRANSPORTER # 1	IND 009842824	Landgrebe Motor Transports, P.O. Box 32 Valparaiso, IN 46383 (219) 464-4181	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Services, P.O. Box 190 420 S. Colfax, Griffith, IN 46319 (219) 924-4370	11/8/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
12 dr.		F005	Flammable Solvent, NOS	UN 1993			55-gal each	660 gal (4800#)		

SPECIAL HANDLING INSTRUCTIONS

FREIGHT PREPAID

If an RO commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other OOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID except when box at right is checked Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

122782

MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Landgrebe Motor Transport

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND 039339759	QMS, P.O. Box 325, Lowell IN 46356 (219) 696-7777	
TRANSPORTER # 1	IND 009842824	Landgrebe Motor Transport, P.O. Box 32, Valparaiso, IN 46383 (219) 464-4181	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Service, P.O. Box 190 Griffith, IN 46319 (219) 924-4370	12/28
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	A L T E R N A T E		

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WTVOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
14		F005	Flammable Solvent NOS	UN 1993			55-gal each	605 gal (4400#)		

SPECIAL HANDLING INSTRUCTIONS

FREIGHT PREPAID

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other OOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID except when box at right is checked Check box if charges are to be correct

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

STATE OF MICHIGAN

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS)

Act 136 Waste

Other

MI 0226375

IDENTIFICATION	Generator's Name Ranir Corp.	Primary Transporter's Name Valley City Refuse Disposal, Inc.	Treatment, Storage or Disposal Facility American Chemical Service, Inc.
	Site Address 4617 East Paris Grand Rapids, MI 49508	Transporter's Address 2650 Thornwood Wyoming, MI 49509	Facility Address 420 S. Colfax Griffith, IN 46319
	Phone Number (616) 698-8880	Phone Number (616) 538-8499	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MIG 000 003 334	Transporter's EPA I.D. Number MID 055 855 373	Facility Site EPA I.D. Number IND 016 360 265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container				Total Weight or Volume	Units	Hazardous or Liquid Waste Number	
						No.	Type	Solid	Liquid				Gas
WASTE INFORMATION	1.	Methyl Ethyl Ketone	Flammable	1193	07	1	Dr	X			99.55	gal	F005
	2.												
	3.												
	4.												
	5.												
	6.												

COMMENTS: Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature
① *Dennis Dean*
Date Shipped
MO. DAY YEAR:
8 26 82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1 640**
Subsequent Transporter Vehicle I.D. No's
Transporter Signature
② *Russell L. Henniger*
Subsequent transporter(s) signature(s)
③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature
④ *J. Purfee*
Facility Site EPA I.D. Number
IND 011 16316 01 205
 Accepted
 Rejected
Date Received
8 26 82

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?
 Yes
 No

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0482412
7

Authorization Number 997795
8 13

Reliable Electric Co. 11333 Addison St. 455 8010 0310960033 G
(Company Name) Address Phone Number Generator Number
Franklin Park, Illinois 60131 ILD005105077
City State Zip EPA Number

WASTE HAULER(S)

Strand Trucking 13642 Kenton, Crestwood, Il. S.W.H. Registration Number 0024001
Hauler Name Hauler Address
385 8440 IN0016360465
Phone Number EPA Number
S.W.H. Registration Number
EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 S. Colfax Ave. 91808902
(Facility Name) Address Site Number
Griffith Indiana 46319 7683400 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DDT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: 1,1,1,Trichlorethane HAZARD CLASS: ORM-A UN or NA Number: UN2831 EPA HW Number: F001

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 002090 1 GALLONS (Circle One) 2 CU. YDS. 1
METHOD OF SHIPMENT (Circle One) (DRUMS 38) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN.

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Linda Lazara DATE: 4-30-82
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) L. Paulsell DATE: 4/30/82
(Authorized Signature) (54) (59)
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.
Michael O'Dwyer DATE: 4/30/82
(Authorized Signature) (60) (65)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-BB02 or 202 / 426-2675
DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR
REV. # 3

SITE COPY - PART 3

On dock 4.30.82 GRM
To IB T-63 GRM 5.7.82

003725

TO BE COMPLETED BY WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6700
SPECIAL WASTE HAULING MANIFEST

0482413

Authorization Number 997794

Reliable Electric Company 11333 Addison St. 455 8010 0310960033
Franklin Park, ILLINOIS 60131 ILD005105077

WASTE HAULER(S)

Strand Trucking 13642 Kenton, Crestwood, IL 60445
Hauler Name Hauler Address S.W.H. Registration Number 0024001
Phone Number 312 385 8440 EPA Number INDO 116360265

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 S. Colfax 91808902
Griffith Indiana 46319 7683400 INDO16360265
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvent WASTE PHASE: Liquid
SHIPPING DESCRIPTION: Trichloroethylene HAZARD CLASS: OPM-A
UN 1710 EPA HW Number E001
WEIGHT FOR D.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 001870
METHOD OF SHIPMENT (Circle One) (DRUMS 34) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONITION FOR TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [Signature] DATE 4-30-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [Signature] DATE 4/30/82
(2) [Signature] DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. [Signature] DATE 4/30/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3 SITE COPY - PART 3 On dock 4.30.82 GRM To 122 RT-63 GRM 5.7.82 003726

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

P06995
5

0554327
7

Authorization Number 998586
8 13

Ready Metal Mfg. Co. 4500 W. 47th St. (312) 376-9700

0316000566
14 G 24

(Company Name)

Address

Phone Number

14

Generator Number

24

Chicago

Il.

60632

ILD005149752

City

State

Zip

EPA Number

WASTE HAULER(S)

Inc.

Technical Petroleum 6233 N. Pulaski, Chgo, Il. 60646

S.W.H. Registration Number 0625001
25 31

Hauler Name

Hauler Address

(312) 463-5200

ILD005441696

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number
32 38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

Amer. Chemical SVC. 420 S. Colfax Ave.

91808902

(Facility Name)

Address

39

Site Number

46

Griffith

Ind.

46319

IND016360265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint Solvent

WASTE PHASE Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Paint Solvent Flammable

NA-1993

UN or NA Number

F005

EPA HW Number

WEIGHT FOR
D.O.T. USE

4000

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED:

000550

47

52

GALLONS (Circle One)
2 CU. YDS.

53

METHOD OF SHIPMENT (Circle One)

DRUMS

10

Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Waste Gen. Co. (Authorized Signature)

DATE:

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED.

(1)

Signature of Waste Hauler 1

(Authorized Signature)

DATE:

4/28/82

(2)

Signature of Waste Hauler 2

(Authorized Signature)

DATE:

4/29/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE

YES

NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

Frank James Price (Authorized Signature)

DATE:

4/28/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 4-28-82 6PM To 125 RT-63
6PM 5-3-82

003727

STATE OF ILLINOIS

PO6995

0554328

TO BE COMPLETED BY
WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

282

Authorization Number 8207894

Ready Metal Mfg. Co. 4500 W. 47th St. (312) 376-9700 0316000566
(Company Name) Address Phone Number Generator Number
Chicago IL 60632 ILD005149752
City State Zip EPA Number

WASTE HAULER(S)

Inc.
Technical Petroleum 6233 N. Pulaski, Chgo, IL 60646 S.W.H. Registration Number 0625001
Hauler Name Hauler Address
(312) 463-5200 ILD005441696
Phone Number EPA Number

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 32

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
Amer. Chemical SVC. 420 S. Colfax Ave. 91808902
(Facility Name) Address Site Number
Griffith Ind. 46319 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint Solvent

WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Paint Solvent Flammable

NA-1993

UN or NA Number

F005

EPA HW Number

WEIGHT FOR D.D.T. USE 2400

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 000330

1 GALLONS (Circle One)
CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS 6)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Wm. Gerth
(Authorized Signature)

DATE: 10-13-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *[Signature]*
(Authorized Signature)

DATE: 10/13/82

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Frank James Price
(Authorized Signature)

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

DATE: 10-13-82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On deck 10.28.82 T0124RT-63 C/M 11/1/82

003728

HAZARDOUS WASTE MANIFEST

448

MANIFEST DOCUMENT NUMBER

SUPERIOR OIL COMPANY

SHIPPER NUMBER

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND000780403	Reclaimed Energy Co., Inc/1500 Western Avenue Connersville, Indiana 47331 (317-825-7101)	
TRANSPORTER # 1	IND039994975	Superior Oil Company/400 W. Regent St/ Indpls IN 46225 (317-783-6681)	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical / P. O. Box 190 / Griffith, IN 46319 (219-924-4370)	7/13/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
5000 gals	X	F005	Hazardous Waste, Liquid NOS (NA9189) (FLAMMABLE LIQUID) Waste Hauler Permit IN 4919-3000-11	NA9189						

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID Freight when paid at right Check box if charges are to be collected

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

71982
MANIFEST DOCUMENT NUMBER

Superior Oil Co. Inc.
NAME OF CARRIER (SCAC)

#109
SHIPPER NUMBER
CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
	IND000780903	RECLAIMED ENERGY CO. INC / 1500 WESTERN AVE CONERSVILLE IND 47331 (317-825-7101)	7/19/82
TRANSPORTER # 1	IND039994915	SUPERIOR OIL CO. INC / 400 W. REGENT ST. INDIANAPOLIS, IND 46225 (317-783-6681)	7/19/82
TRANSPORTER # 2 (If required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL / PO. BOX 190 / GRIFFITH, IND (219-929-4370) 46319	7/22/82
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WTVOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
2900 gals	X	HAZARDOUS WASTE, LIQUID NOS. NA 1993 WASTE HAULER PERMIT 1W4919-3000-11	NA 1993				2900 gals		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
Signature _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
(Signature of Consignor) _____

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID except when box at right is checked. Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency.

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

449

MANIFEST DOCUMENT NUMBER

SUPERIOR OIL COMPANY

SHIPPER NUMBER

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND000780403	Reclaimed Energy Co., Inc/1500 Western Avenue Connersville, Indiana 47331 (317-825-7101)	
TRANSPORTER # 1	IND039994975	Superior Oil Company Inc/400 W. Regent Street Indianapolis, Indiana 46225 (317-783-6681)	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical / P. O. Box 190 / Griffith, IN 46319 (219-924-4370)	8/10/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
5000 gals	X	F005	FLAMMABLE LIQUID Hazardous Waste, Liquid NOS Waste Hauler Permit IN 4919-3000-11	NA199B						

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT

TOTAL CHARGES: \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
Signature _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
(Signature of Consignor) _____

FREIGHT CHARGES
FREIGHT PREPAID Check box if charges are to be collected except when box is checked

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal

Don Z...
GENERATOR'S SIGNATURE

10 82
DATE

[Signature]
TSDF SIGNATURE

8/10/82
DATE

HAZARDOUS WASTE MANIFEST

450

MANIFEST DOCUMENT NUMBER

Superior Oil Company

SHIPPER NUMBER

131-104

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12-DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
	IND000780403	Reclaimed Energy Co., Inc/1500 Western Avenue Comersville, Indiana 47331 (317-825-7101)	
TRANSPORTER # 1	IND039994975	Superior Oil Company Inc/400 W. Regent St Indianapolis, Indiana 46225 (317-783-6681)	
TRANSPORTER # 2 (if required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical/P. O. Box 190/Griffith, Indiana 46319 (219-924-4370)	8/30/82
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
6000 gals	X	F005	Hazardous Waste, Liquid NOS (flammable liquid) Waste Hauler Permit IN 4919-3000-11	NA9189						

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Am: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID except when box at right is checked Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

493

MANIFEST DOCUMENT NUMBER

SUPERIOR OIL COMPANY

SHIPPER NUMBER

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
	IND000780403	Reclaimed Energy Co., Inc./1500 Western Avenue Comersville, Indiana 47331 (317-825-7101)	
TRANSPORTER # 1	IND039994975	Superior Oil Company/400 W. Regent St/ Indpls IN 46225 (317- 825 783-6681)	
TRANSPORTER # 2 (If required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	American Chemical/P. O. Box 190 / Griffith, IN 46319 (219-924-4370)	9/23/95
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
5000 gals	X	F005	Hazardous Waste Liquid NOS (NA9189) (Flammable Liquid) Waste Hauler Permit IN 4919-3000-11	NA9189				5000 gals		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

TOTAL CHARGES: \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

FREIGHT CHARGES

FREIGHT PREPAID except when box at right is checked Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

494

MANIFEST DOCUMENT NUMBER

SUPERIOR OIL CO. INC

NAME OF CARRIER

(SCAC)

SHIPPER NUMBER

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND000780403	RECLAIMED ENERGY CO. INC. / 1500 WESTERN AVE CONNERSVILLE, IND (317-825-7101)	10-15-82
TRANSPORTER # 1	IND03999997X	SUPERIOR OIL CO. INC. / 400 WEST REGENT ST INDIANAPOLIS, IND (317-783-6681)	10-15-82
TRANSPORTER # 2 (If required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL / P.O. BOX 190 / GRIFFITH IND (219-924-4730)	10-15-82
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
6000 gsk	X	F005	HAZARDOUS WASTE LIQUID NOS (FLAMMABLE LIQUID) WASTE HAULER PERMIT IN-4919-3000-11	NA 9189				6000		

SPECIAL HANDLING INSTRUCTIONS

If an RO commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID except when box or right is checked Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted, contents and condition of contents of packages unknown, marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0645592

Authorization Number 997 794

Reliable Electric Co. 11333 Addison Street 31 24558010 031 096 003 3
(Company Name) Address Phone Number 14 Generator Number 24
Franklin Park Illinois 60131 I LD 00 5105 077
City State Zip EPA Number

WASTE HAULER(S)

Strand Trucking 13642 Kenton, Crestwood, IL. 60445
Hauler Name Hauler Address S.W.H. Registration Number 0 024 001
3123858440 I ID 0 16360266
Phone Number EPA Number 00846810

Hauler Name Hauler Address S.W.H. Registration Number 32 EPA Number 38
Phone Number EPA Number

American Chemical Service 420 S. Colfax 91-808902
(Facility Name) Address 39 Site Number 46

Griffith Indiana 46319 3127683400 I ND 016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW
SHIPPING DESCRIPTION: HAZARD CLASS:

Trichlorethylene ORM-A UN 17 10 F 001
UN or NA Number EPA HW Number

WEIGHT FOR D.D.T. USE 18,100 18 TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 0.01540 0.01540 GALLONS (Circle One)
CONVERTED TO CU. YDS. OR GAL. 47 52 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One) (DRUMS 24) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN
Number

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Raymond Pany DATE: 6-18-82
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) Jim Butler DATE: 6/18/82
(Authorized Signature) 54 59
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
Michael O. Buz DATE: 6/18/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 - GENERATOR

On dock 6.18.82
To 122 RT-63 GRM 6.23.82

003735

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0435982

Authorization Number 9 9 7 7 9 4
8 13

Reliable Electric Co. 11333 Addison St. 45 5 8 0 1 0 0 3 1 0 9 6 0 0 3 3 G
(Company Name) Address Phone Number 14 Generator Number 24
Franklin Park Illinois 60131 I L D 0 0 5 1 0 5 0 7 7
City State Zip EPA Number

WASTE HAULER(S)

~~XXXXXXXXXX~~ ~~201 Woodlawn St. So. Woodlawn, Ill.~~ S.W.H. Registration Number 25 31
Hauler Name Hauler Address
~~XXXXXXXXXX~~ ~~XXXXXXXXXX~~ EPA Number

Strand Trucking 13642 Kenton Crestwood, Il. 60445 S.W.H. Registration Number 0 0 2 4 0 0 1
Hauler Name Hauler Address 32 38
3 8 5 8 4 4 0 Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 S. Colfax Ave. 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith Indiana 46319 7 6 8 3 4 0 0 I N D 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Trichlorethlene

WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Trichbrethylene

ORM-A

UN 1710
UN or NA Number

EPA HW Number

WEIGHT FOR D O T USE _____ LBS _____ TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 0 0 3 7 4 0
47 52

GALLONS (Circle One) 1
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS 68) Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION:

Shirley Duggan
(Authorized Signature)

DATE: 3/31/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) *L. Leland*
(Authorized Signature)

DATE: 3/31/82
54 59

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

DATE: 3 31 82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 3-31-82 6 AM
TO 122 F T-63 6 AM 4-1-82

003736

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0482414

Authorization Number ~~9 97 794~~
8 13

Reliable Electric Co. 11333 Addison Street 312 455 8010 031 096 0033 G
(Company Name) Address Phone Number 14 Generator Number 24
Franklin Park Illinois 60131 ILD 0 0510 50 77
City State Zip EPA Number

WASTE HAULER(S)

Strand Trucking 13642 Kenton Crestwood, Ill. S.W.H. Registration Number 0 024 001
Hauler Name Hauler Address 25 31
312 385 8440 IND 016360265
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number
ILD 000646810

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 S. Colfax 918 089 02
(Facility Name) Address 39 Site Number 46
Griffith Indiana 46319 312 768 3400 IND 016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Trichlorethylene HAZARD CLASS: ORM-A UN 1710 F 001
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE 12,000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 0 011 001 1 GALLONS (Circle One) 2 CU. YDS.
47 52 53

METHOD OF SHIPMENT (Circle One) (DRUMS 10) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN
Number

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [Signature] DATE: 7-21-82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature] DATE: 7/21/82
(Authorized Signature) 54 59
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature] DATE: 7/21/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 7.22.82 TO IAKT-63 GUM 8.9.82

003737

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0675012
7

Authorization Number 8 13

Reliable Electric Co. <small>(Company Name)</small>	11-33 Addison St. <small>Address</small>	455 8010 <small>Phone Number</small>	03 1096 0033 <small>Generator Number</small>
Franklin Park <small>City</small>	Illinois <small>State</small>	60131 <small>Zip</small>	ILD 005105077 <small>EPA Number</small>

WASTE HAULER(S)

Strand Trucking <small>Hauler Name</small>	13642 Kenton, Crestwood Il. <small>Hauler Address</small>	385-8440 <small>Phone Number</small>	S.W.H. Registration Number 0024001 <small>25</small>
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<small>Hauler Name</small>	<small>Hauler Address</small>	<small>Phone Number</small>	<small>S.W.H. Registration Number</small>
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American Chemical Service <small>(Facility Name)</small>	420 S. Colfax <small>Address</small>	91808902 <small>Site Number</small>
---	---	--

Griffith <small>City</small>	Indiana <small>State</small>	46319 <small>Zip</small>	768-3400 <small>Phone Number</small>	IND016360265 <small>EPA Number</small>
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<small>Alternate (Facility Name)</small>	<small>Address</small>	<small>City</small>	<small>State</small>	<small>Zip</small>	<small>Phone Number</small>	<small>EPA Number</small>
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TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvents

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Trichlorethylene

ORM-A

UN 1710
UN or NA Number

F001
EPA HW Number

WEIGHT FOR D.O.T. USE	LBS TONS (circle one)	WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.	QUANTITY OF WASTE DELIVERED: 001350 <small>47</small>	1 GALLONS (Circle One) 2 CU. YDS. 1 <small>52 53</small>
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METHOD OF SHIPMENT (Circle One)

(DRUMS 25)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Linda Pazzara
(Authorized Signature)

DATE 10-15-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *L. Lusk*
(Authorized Signature)

DATE: 10/15/82
54 59

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

DATE 10/15/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

On dock 10-15-82 To 120 F T-63
EKW 10-20-82

003738

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0645594
7

Authorization Number 8 13

Reliable Electric Co. 11333 Addison St. 312 455 8010 031 09 600 33 G
(Company Name) Address Phone Number 14 Generator Number 24
Franklin Park Illinois 60131 IL D0 05105 07 7
City State Zip EPA Number

WASTE HAULER(S)

Strand Trucking 13642 Kenton Crestwood, IL. S.W.H. Registration Number 0024001
Hauler Name Hauler Address 25 31
385-8440 Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
American Chemical Service 420 S. Colfax 91808902
(Facility Name) Address 39 Site Number 46
Griffith Indiana 46319 312 768 3400 IN D016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Trichlorethylene HAZARD CLASS: ORM-A UN 1710 F001
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 001296 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 24) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION *Sandra Lippman* DATE: 10-15-82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *R. Lull* DATE: 10/15/82
(Authorized Signature) 54 59

(2) DATE: / /
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. *M. Daniel* DATE: 10/15/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

on dock 10-15-82 To 120 RT-63
GUM 10-20-82

003739

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0482415

Authorization Number 8 13

Reliable Electric Co. 11333 Addison Street 455-8010 031 09 600 33 G
(Company Name) Address Phone Number 14 Generator Number 24
Franklin Park Illinois 60131 I L D 0051 05 077
City State Zip EPA Number

WASTE HAULER(S)

Strand Trucking 13642 Kenton, Crestwood, Il. S.W.H. Registration Number 0024001
Hauler Name Hauler Address 25 31
~~XXXXXXXX~~ 385-8440
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
American Chemical Service 420 S. Colfax 91808902
(Facility Name) Address 39 Site Number 46

Griffith Indiana 46319 768-3400 INDO16360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvents WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

1,1,1, Trichloroethane

UN 2831
UN or NA Number

F001
EPA HW Number

WEIGHT FOR D.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 000918 1 GALLONS (circle one)
47 52 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One) (DRUMS 17) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN
Number

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Sandra Lopez
(Authorized Signature)

DATE: 10-15-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) *S. Paul*
(Authorized Signature)

DATE: 10/15/82
54 59

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

Michael Berg
(Authorized Signature)

DATE: 10/15/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

On deck 10-15-82 Toll 11871-63
6PM 11-23-82

003740

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0312148

Authorization Number 998585

REVCOR INC. 251 EDWARDS ST.
(Company Name) Address
CARPENTERSVILLE ILLINOIS 60110
City State Zip

0890200009
Generator Number

AMERICAN CHEMICAL 420 S. COLFAX AVE
Hauler Name Hauler Address S.W.H. Registration Number 0024002

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVE.
(Facility Name) Address
GRIFFITH INDIANA 46319
City State Zip

91808902
Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENT

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.T. USE 8550 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL. GAL.

QUANTITY OF WASTE DELIVERED: 00950

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-16-1982

Alan E. Huffer
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Donald Stair-Dove
(Authorized Signature)

DATE: 02/16/82

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Medical Center
(Authorized Signature)

DATE: 2/16/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

Ondock 2/16/82

To 210 FT-50
GEM

SITE COPY - PART 3
6-30-82

003741

COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

06071

Authorization Number 998585
B 13

REVCOR INC. 251 EDWARDS ST. (312) 428-4411 0890200009
(Company Name) Address Phone Number Generator Number
CARPENTERSVILLE ILL. 60010 ILD005455183
City State Zip EPA Number

WASTE HAULER(S)

LANDGREB 130 STATE RD. VALPARAISO INDIANA 46385 S.W.H. Registration Number ICC2980
Hauler Name Hauler Address Phone Number EPA Number
3127210095 IND009842824

Hauler Name Hauler Address Phone Number S.W.H. Registration Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL 420 S. COLFAX AVE. 91808902
(Facility Name) Address Site Number
GRIFFITH INDIANA 46319 (312) 7683400 INDO16360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENT LIQUID WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

ORM-E

NA9189
UN or NA Number

F001
EPA HW Number

WEIGHT FOR D.D.T. USE 1067 LBS (circle one) TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 000110 GALLONS (Circle One) CU. YDS. 2

METHOD OF SHIPMENT (Circle One) (DRUMS 2) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Alan E. Hifford
(Authorized Signature)

DATE: 5/12/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Fred Kozeln (2)
(Authorized Signature)

DATE: 5/12/82

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Frank James Price
(Authorized Signature)

DATE: 5/13/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. 14

SITE COPY - PART 3

On dock 5.13.82 GRM

To IAK 7-63
GRM 8.9.82

003742

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

0297338

SPECIAL WASTE HAULING MANIFEST

USEPA Authorization Number 998475 1LT 180011868 0316000089 Generator Number

RHEEM MFG CO CONTAINER DIV 7600 S. KEDZIE AVE CHICAGO ILL 60612 City MIKE SULLIVAN State IL Zip

AMERICAN CHEMICAL SERVICES 4205 POLIFAX AVE GRIFFITH IND 13642 Hauler Name Hauler Address STRAND TRUCKING CRESTWOOD ILL 60445 Hauler Name Hauler Address

S.W.H. Registration Number 00241002 1LT000646810 S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES 4205 POLIFAX AVE GRIFFITH IND 46319 (Facility Name) Address City State Zip

91808902 Site Number IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT/SOLVENTS

WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TRUCK

HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE EST 9 GAL / LBS TONS (circle one) EST 19.80 TONS

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

80 QUANTITY OF WASTE DELIVERED: 204400

1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-2-82

E. Gracke (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) L. Lull (Authorized Signature) (2) (Authorized Signature)

PLACARDS OFFERED OR AFFIXED INITIAL

DATE: 2/02/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael E. B... (Authorized Signature)

DATE: 2/12/82

COMMENTS OR SPECIAL INSTRUCTIONS: MSD # 099647 DOT NA 1993 DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

On dock 2/2/82 GRM 10 TO 2/19/82 644 70 TO 1262 TSB 6/10/82 7/15/82

SITE COPY - PART 3

003743

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST

0510819

Authorization Number 998957

RHEEM MFG. CO. 7600 S. KEDZIE 4347500 0316000089 CHGO ILL 60653 ILD0001853308

WASTE HAULER(S)

STRAND TRUCKING 13642 KENTON CRESTWOOD ILL 60445 3123858440 0024001 ILT000646810

AMERICAN CHEM CO. 420 S. COLFAX 91808902 GRIFFITH IND 46319 3127683400 IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE PAINT SOLVENT WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: DRUMS HAZARD CLASS: FLAM LIQUID UN1993 FO17

WEIGHT FOR D.O.T. USE 12.760 TONS WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 1595 GALLONS

METHOD OF SHIPMENT (Circle One) (DRUMS 29) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION DATE: 2/15/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) Signature DATE: 2/15/82 (2) Signature DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

Signature DATE: 2/15/82

COMMENTS OR SPECIAL INSTRUCTIONS:

On dock 2/15/82 6:24 PM To 202 RT-50 6PM 2/19/82

003744

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0510818

Authorization Number 998476
8 13

RHEEM MFG CO 7600 S. KEDZIE 3124347500 0316000089
(Company Name) Address Phone Number 14 Generator Number 24
CHICAGO ILL 60652 ILD001853308
City State Zip EPA Number

WASTE HAULER(S)

STRAND TRUCKING 13642 KENTON S.W.H. Registration Number 0024001
Hauler Name Hauler Address 25 31
CRESTWOOD, ILL 60445
3123858440 Phone Number ILT000646810 EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEM SERV. 420 S. COLFAX 91808902
(Facility Name) Address 39 Site Number 46
GRIFFITH IND. 46319 3127683400 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR
WASTE NAME: WASTE 1-1-1 TRICHLOROETHANE WASTE PHASE: LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION: DRUMS HAZARD CLASS: NON-FLAM LIQUID UN or NA Number UN2831
EPA HW Number F001

WEIGHT FOR D.D.T. USE 19800 LBS (circle one) TDNS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CDVERTED TO CU. YDS. DR GAL. QUANTITY OF WASTE DELIVERED: 1780 GALLONS (Circle One) 2 CU. YDS. 52 53

METHOD OF SHIPMENT (Circle One) (DRUMS 36) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [Signature] DATE: 2/15/82
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
[Signature] DATE: 2/15/82
(Authorized Signature) 54 59
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
[Signature] DATE: 2/15/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS MSD 060617

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3 SITE COPY - PART 3
On dock 2/15/82
To TRK T-63610M 2/16/82
003745

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0297339

CONTAINER/DIV.
RHEEM MFG. CO. 7600 S. KEDZIE AVE
(Company Name) Address
CHICAGO ILL. 60612
City State Zip

Authorization Number 998475
USEPA ILT 180011868
0316000089
14 Generator Number 24

WASTE HAULER(S)
AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE GRIFFIN IND
Hauler Name Hauler Address
13642 KENTON
STRAND TRUCKING CRESTWOOD ILL 60445
Hauler Name Hauler Address

S.W.H. Registration Number 0024001
ILT000646810
S.W.H. Registration Number
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE
(Facility Name) Address
GRIFFIN IND. 46319
City State Zip

91808902
39 Site Number 46
IND 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE PAINT/SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

TRUCK

FLAMMABLE

WEIGHT FOR D.O.T. USE EST 9 GAL LBS TONS (circle one)
EST 19.80 TONS

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

80

QUANTITY OF WASTE DELIVERED: 004400
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-23-82

E. Graste
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)

PLACKARD OFFERED
OR AFFIXED
INITIAL

DATE: 3/23/82
54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

DATE: 3/23/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

MSD # 099645 DOT NA1993

DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

On dock 3/23/82 GRM

To 125 RT-636 RM 3/25/82

SITE COPY - PART 3

003746

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0588623

Authorization Number 998476

RHEEM MFG. CO. 7600 So. KEDZIE 3124347500 0316000089
(Company Name) Address Phone Number Generator Number
CHGO Ill 60652 120001853308
City State Zip EPA Number

WASTE HAULER(S)

STAND HAULING 13642 KINION CHICAGO Ill
Hauler Name Hauler Address S.W.H. Registration Number 0024002
312-385-8440 917000646810
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number
Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM 420 So. COLFAX 91808902
(Facility Name) Address Site Number
GRIFFITH INDIANA 46319 768-3400 120016360263
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENT WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: DRUMS HAZARD CLASS: F017 UN or NA Number UN1993 EPA HW Number 8005

WEIGHT FOR D.O.T. USE 20900 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 2090 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS Number 38) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE: 5/6/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) (Authorized Signature) DATE: 5/6/82
(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature) DATE: 5/6/82

COMMENTS OR SPECIAL INSTRUCTIONS:

MSD 060585

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 5-6-82 GRM
To 125 FT-63 GRM 5-11-82

003747

COMPLETED BY:
GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0297340
1 7

SPECIAL WASTE HAULING MANIFEST

USEPA Authorization Number 998475
180011868
0316000089
14 Generator Number 24

RHEEM MFG Co. CONTAINER DIV 7600 S. KEDZIE AVE
(Company Name) Address
CHICAGO ILL. 60612
City State Zip

AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE GRIFFITH, IND 312-434-7500
Hauler Name Hauler Address S.W.H. Registration Number 0024/002
STRAND TRUCKING 13642 KENTON
CRESTWOOD, ILL 60445
Hauler Name Hauler Address S.W.H. Registration Number 117000646810
31 32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE 312-768-3400
AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE 91808902
(Facility Name) Address Site Number
GRIFFITH IND 46319
City State Zip IND 016360265

TO BE COMPLETED BY WASTE GENERATOR
WASTE NAME: WASTE PAINT/SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TRUCK HAZARD CLASS: FLAMMABLE
WEIGHT FOR EST 9# GALLONS D.O.T. USE EST 19.80 TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. DR GAL 38.080
QUANTITY OF WASTE DELIVERED: 004400
GALLONS (Circle One) 1
CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/14/82 Major Rose 80 DMS
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Steve Shatt (Authorized Signature) PLACARD OFFERED OR AFFIXED DATE: 5/14/82
(2) INITIAL DATE: 5/14/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
Michael P. Dwyer (Authorized Signature) DATE: 5/14/82

COMMENTS OR SPECIAL INSTRUCTIONS: MSD # 099649 DOT NA 1993
DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

IN ILLINOIS: 217/782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800/424-8802
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

On dock 5.14.82 To 126K SITE COPY - PART 3
GRM T-63 GRM 5.18.82
003743

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0297341

Authorization Number 998475
USE PA# ILT180011867

RHEEM MFG Co. CONTAINER DIV. 7600 S. KEDZIE AVE
(Company Name) Address 312 434-7500
CHICAGO ILL. 60612
City State Zip

0316000089
Generator Number

AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE
Hauler Name Hauler Address
13642 KENTON 312-385-8440

S.W.H. Registration Number X0024/002
1LT000646810

STRAND TRUCKING CRESTWOOD ILL 60445
Hauler Name Hauler Address

S.W.H. Registration Number 32

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE 312-768-3400

AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE
(Facility Name) Address
GRIFFITH IND 46319
City State Zip

91808901
Site Number
IND 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE PAINT/SOLVENTS

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)
1993

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TRUCK HAZARD CLASS: FLAMMABLE

~~HAZARDOUS~~
WEIGHT FOR EST 9# GAL (LBS) TONS (circle one)
D.O.T. USE EST 11.38 TONS

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL. 22,770

QUANTITY OF WASTE DELIVERED: *002530

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/22/82

x Major Rosen
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Stan Shum
(Authorized Signature)

PLACKARD OFFERED
DRAFFIXED

DATE: 6/22/82

(2) _____
(Authorized Signature)

INITIAL x

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael O'Beirne
(Authorized Signature)

DATE: 6/22/82

COMMENTS OR SPECIAL INSTRUCTIONS: MSD# 099649 DOT NA1993

DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

To 124K T-63 6KM 62252

SITE COPY - PART 3

003749

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0297342
1 7

Authorization Number ~~998475~~
8 13

RHEEM MFG CO. CONTAINER DIV 7600 S. KEDZIE AVE
(Company Name) Address
CHICAGO ILL 60652
City State Zip

0316000089
14 24
Generator Number

WASTE HAULER(S)
AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE
Hauler Name Hauler Address S.W.H. Registration Number X0024/001
13642 KENTON - 313-385-8440 ILT000646810
STRAND TRUCKING CRESTWOOD ILL 60445
Hauler Name Hauler Address S.W.H. Registration Number 32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE 768-3400
(Facility Name) Address S.W.H. Registration Number 91808902
GRIFFIN IND 46319
City State Zip Site Number 39 46
IND.016360265

TO BE COMPLETED BY
WASTE GENERATOR
WASTE NAME: WASTE PAINT/SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: TRUCK HAZARD CLASS: FLAMMABLE
WEIGHT FOR D.D.T. USE: EST 13.11 TONS (circle one)
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GALX 26235 QUANTITY OF WASTE DELIVERED: X002915
METHDD OF SHIPMENT (Circle One) DRUMS 53 TANK TRUCK OPEN TRUCK OTHER (Specify) VAN
GALLONS (Circle One) 1 CU. YDS. 1

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
DATE: X 8/12/82 x [Signature] (Authorized Signature)

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) [Signature] X PLACKARD OFFERED DATE: X 8-12-82
(Authorized Signature) OR AFFIXED INITIAL X
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
[Signature] DATE: 8/12/82
(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS: MSD #099649 DOT NA1993
DESCRIPTION OF RECYCLE MATERIALS: F003 F005 F017

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

To 126 F T-63 GRMA 8.12.82
SITE COPY - PART 3
003750

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0297343

Authorization Number 0316000089

RHEEM MFG Co, CONTAINER DIV, 7600 So. KEDZIE AVE
(Company Name) Address
CHICAGO Ill 60652
City State Zip

Generator Number 0316000089

WASTE HAULER(S)
AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE
Hauler Name Hauler Address
13642 KENTON 312-385
STRAND TRUCKING CRESTWOOD ILL 60445 8440
Hauler Name Hauler Address

S.W.H. Registration Number 0024002
S.W.H. Registration Number 180011868

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE
(Facility Name) Address
GRIFFITH IND 46319
City State Zip

Site Number 91808902
IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE PAINT/SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TRUCK 1 UNIT DIRTY HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE EST 9 TONS (circle one)
18.56

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. 37,125

QUANTITY OF WASTE DELIVERED: 004125

GALLONS (Circle One) 1
CU. YDS. 1

METHOD OF SHIPMENT (Circle One) DRUMS 75 TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/20/82 [Signature]
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [Signature] PLACKARD OFFERED
(Authorized Signature) OR AFFIXED
(2) [Signature] INITIALS
(Authorized Signature)

DATE: 9/20/82
DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 9/20/82

COMMENTS OR SPECIAL INSTRUCTIONS: MSD # 099649 DOT NA1993

DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

TO 124 F T-83 GRM 9.20.82 SITE COPY - PART 3

003751

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0242202

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998476

RHEEM MFG. CO.
(Company Name)
CHICAGO
City
7600 So. KEDZIE
Address
ILL 60632
State Zip

0316000089
Generator Number
ILD 001853308
Site Number

STRAND TRUCKING
Hauler Name
13642 KENTON
Hauler Address
CRESTWOOD, ILL
312-385-8440
Hauler Address

S.W.H. Registration Number 0024002
ILT 000646810
S.W.H. Registration Number

768-3400
DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEM
(Facility Name)
GRIFFITH
City
420 So. COLFAX
Address
INDIANA 46319
State Zip

91808902
Site Number
IND 01636026
Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT. SOLVENT WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: DRUMS HAZARD CLASS: F017
UN 1993 F005
WEIGHT FOR D.D.T. USE: 5280 3000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 660
0003
METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) UAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9-29-82
[Signature]
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)
(2) _____
(Authorized Signature)

DATE: 9/29/82
DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: _____

COMMENTS OR SPECIAL INSTRUCTIONS:

MSD 099636

To 125 RT-63 6PM 9-29-82 SITE COPY - PART 3
003752

STATE OF ILLINOIS

TO BE COMPLETED BY
WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0242201

SPECIAL WASTE HAULING MANIFEST
315-434-7500

Authorization Number 995476

RHEEM MFG CO
CHICAGO
City

7600 SO. KEDZIE
Address
Ill
60652
State Zip

0316000089
Generator Number
14 001853308 24

STRAND TRUCKING
Hauler Name
13642 KENTON
Hauler Address
CRESTWOOD, ILL 60445
312-385-8440
Hauler Address

WASTE HAULER(S)
S.W.H. Registration Number 002400
25 31
ILT000646810
S.W.H. Registration Number 32 38

AMERICAN CHEM SERV.
(Facility Name)
GRIFFITH
City
420 SO. COLFAX
Address
IND 46319
State Zip

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
91808902
Site Number 39 46
IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: 1-1-1 TRICHLOROETHANE
WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: DRUMS, NON-FLAM LIQUID
HAZARD CLASS: UN2831
FOOL
WEIGHT FOR D.O.T. USE: 6450 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL
QUANTITY OF WASTE DELIVERED: 000645
METHOD OF SHIPMENT (Circle One): DRUMS
TANK TRUCK OPEN TRUCK OTHER (Specify) VAN
12

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
DATE: 9/29/82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Jim Batten (Authorized Signature)
DATE: 9/29/82
(2) (Authorized Signature)
DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
HAZARDOUS WASTE SUBJECT TO FEE YES NO
(Authorized Signature) DATE: / /

COMMENTS OR SPECIAL INSTRUCTIONS:
MSD 099635

On dock 9.29.82 ToIBKT-63 SITE COPY - PART 3
003753

DE COM. ED BY
WASTE GENL

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0297344

SPECIAL WASTE HAULING MANIFEST

Authorization Number ~~983475~~
8 13

RHEEM MFG CO. CONTAINER DIV 7600 SO. KEDZIE AVE
(Company Name) Address
CHICAGO Ill. 60652
City State Zip

0316000089 G
14 Generator Number 24

AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE
Hauler Name Hauler Address
312-385-8440 13642 KENTON
STRAMO TRUCKING CRESTWOOD ILL. 60445
Hauler Name Hauler Address

WASTE HAULER(S) 312-748-3400 00247002
S.W.H. Registration Number ~~100700~~
1LD00064617 180011868 31
S.W.H. Registration Number 810 32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICES 4205 COLFAX AVE
(Facility Name) Address
GRIFFITH IND 46319
City State Zip

91808902
39 Site Number 46
IND0016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE PAINT/SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: TRUCK HAZARD CLASS: FLAMMABLE
DIRTY SOLVENT

WEIGHT FOR EST 9 # (LBS)
D.O.T. USE 18.31 TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL 36,630

QUANTITY OF WASTE DELIVERED: 47 52
X004/070

1 GALLONS (Circle One)
2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One) DRUMS 74 TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/10/82 x Major Rose
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Stan Stan x PLACKARD OFFERED
(Authorized Signature) DRAFFIXED
(2) INITIALX
(Authorized Signature)

DATE: 11/10/82 54 59
DATE: 1 1 1

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael Ferg x
(Authorized Signature)

DATE: 11/10/82 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: MSD #099649 DOT VA1993
DESCRIPTION OF RECYCLE MATERIALS F003 F005 F017

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

62 To 125 R T-63 GEN
12 To Solid Mix T-50 GEN 11/10/82

SITE COPY - PART 3

003754

STATE OF ILLINOIS

0403960

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number 997037

Rockdale Coatings 200 Moen Ave #5 815729451019708500026
Rockdale IL 60436 ILD069997559

WASTE HAULER(S)

Mr. Frank, Inc. 201 West 155th Street S. Holland, Il. 60473 312-596-3377
S.W.H. Registration Number 0079019 FED ID ILD 069506160

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Service 420 S. Colfax 91808902
Griffith Indiana 46319 9127683400 IND016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint solvent WASTE PHASE: liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Solvent, paint HAZARD CLASS: flammable UN 1993 F 005

WEIGHT FOR D.O.T. USE 45,000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004800

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION T. Donaghy (Authorized Signature) DATE 7-18-82

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature) DATE 07/18/82
(2) (Authorized Signature) DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
b.b. (Authorized Signature) DATE 07/18/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV # 3 SITE COPY - PART 3 To 210 R T-50 GRM 7/18/82

003755

HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

MANIFEST DOCUMENT NUMBER
ILD 069997559

Mr. Frank

SHIPPER NUMBER
ILD 069506160

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	ILD 069997559	Rockdale Coatings 200 Moen Ave Bldg #5 Rockdale, Ill 60436 815-729-4510	3/10/8
TRANSPORTER # 1	ILD 069506160	Mr. Frank Inc. 201 W. 155th St., So. Holland, Il. 312-596-3377	3/10/8
TRANSPORTER # 2 (If required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemicals Service 420 S. Colfax L Griffith, Ind. P N A T E 312-768-3400	3/10/8

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGE (For Carr Use Onl)
Tank Truck	XX	Waste Solvent Flammable Liquid, N.O.S.	UN1993		4,500 gal	4,500 gal		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED
Yes No

REMIT C.O.D. TO: ADDRESS

COD Amt: \$

C.O.D. FEE:
PREPAID
COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

TOTAL CHARGES: \$

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked Check box if charges are to collect

\$ _____ per _____ Signature _____

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE _____ TRANSPORTER #2 SIGNATURE & DATE (if required) _____
This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

STATE OF ILLINOIS

0403961

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 0 3 7
8 13

ROCKDALE COATINGS 200 MOEN AVE 815-729-4510 1 9 7 0 8 5 0 0 0 2
(Company Name) Address Phone Number Generator Number
Rockdale IL 60436 IL D 0 6 9 9 9 7 5 5 9
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. 201 West 155th Street 0 0 7 9 0 2 1
Hauler Name Hauler Address S.W.H. Registration Number
S. Holland, IL 60473 312-596-3377 FED ID ILD 069506160
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number EPA Number
Phone Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Service 420 S. Colfax 9 1 8 0 8 9 0 2
(Facility Name) Address Site Number
Griffith Indiana 46319 312-768-3400 I N D 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint solvent

WASTE PHASE: liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent, paint

flammable

UN 1993
UN or NA Number

F 0 0 5
EPA HW Number

WEIGHT FOR D.O.T. USE LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED 0 4 7 0 0
27 52 53
GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 3-10-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature)
(2) (Authorized Signature)

DATE: 03/10/82
54 59
DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature)

DATE: 3 10 82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 210 R T-50
GEM 3/10/82

003757

HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

MANIFEST DOCUMENT NUMBER

ILD 069997559

SHIPPER NUMBER

IND 016360265

American Chemical Service

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPP OR RECEIV
GENERATOR/ SHIPPER	ILD 069997559	Rockdale Coatings 200 Moen Ave Bldg #5 Rockdale, Ill 60436 815-729-4510	6/18/82
TRANSPORTER # 1	IND 016360265	American Chemicals Service 420 S. Colfax Griffith, Ind. 312-768-3400	6/18/82
TRANSPORTER # 2 (If required)			
TSDf TREATMENT STORAGE OR DIS- POSAL FACILITY			
TSDf TREATMENT STORAGE OR DIS- POSAL FACILITY	IND 016360265	American Chemicals Service 420 S. Colfax Griffith, Ind. 312-768-3400	6/18/82

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGE (For Car Use Onl)
30 Drums	XX	Waste Solvent Flammable Liquid, N.O.S.	UN1993					4880 gal

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERE

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID except when box at right is checked Check box if charges are to be collected

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Signature

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

STATE OF ILLINOIS

0527787

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST

Authorization Number 997037

Rockdale Coatings 200 Moen Ave 815-729-4510 1970850002 Rockdale IL 60436 ILD069997559

WASTE HAULER(S)

American Chemical Ser. 420 S. Colfax Griffith, Ind. 312-768-3400 STEANIS TACKING 13640 Kenton 312-385-8440

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chem. Service 420 S. Colfax Griffith Indiana 46319 312-768-3400 I N D O 1 6 3 6 0 2 6

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Paint solvent WASTE PHASE: liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION: Solvent, paint HAZARD CLASS: flammable UN 1993 F 005

WEIGHT FOR D.O.T. USE 42000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 4400 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 80) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION DATE 6-10-82

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) [Signature] DATE 6/10/82 (2) [Signature] DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE Michael [Signature] DATE 6/10/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675 DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 6:10-82 To 125 K T-63 6PM

003759

HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

MANIFEST DOCUMENT NUMBER
ILD 069997559

AMERICAN CHEMICAL SERVICE

SHIPPER NUMBER
IND 016360265

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	ILD 069997559	ROCKDALE COATINGS 200 MOEN AVE BLDG 35 ROCKDALE, ILL 60436 815-729-4510	6/11/82
TRANSPORTER # 1	IND 016360265	AMERICAN CHEM. SERVICE 420 COLFAX GRIFFITH, IND. 46319 312-768-3400	6/11/82
TRANSPORTER # 2 (If required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEM. SERVICE 420 COLFAX GRIFFITH, IND. 46319 312-768-3400	6/11/82

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGE (For Carrier Use Only)
59	XX	WASTE SOLVENT FLAMMABLE LIQUID, N.O.S.	UN1993			3200		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERE

Yes No

REMIT C.O.D. TO: ADDRESS

COD Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:
\$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

TOTAL CHARGES: \$

FREIGHT CHARGES
FREIGHT PREPAID except when box at right is checked Check box if charges are to collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE _____ TRANSPORTER #2 SIGNATURE & DATE (if required) _____

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE _____

DATE _____

TSDf SIGNATURE _____

DATE _____

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0527788

Authorization Number 997037

ROCKDALE COATINGS 200 MOEN AVE 815-729-4510 1970850002
(Company Name) Address Phone Number Generator Number
ROCKDALE IL 60436 ILD069997559
City State Zip EPA Number

WASTE HAULER(S)

AMERICAN CHEM. SERVICE 420 S. COLFAX 312-768-3400 0024001
Hauler Name Hauler Address Phone Number S.W.H. Registration Number
GRIFFITH, IND. 46319 IND016360265
STEAM TRUCK 13642 HEINTON 3123555440 0024001
Hauler Name Hauler Address Phone Number S.W.H. Registration Number
14T000646S10
EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEM. SERVICE 420 S. COLFAX 91808902
(Facility Name) Address Site Number
GRIFFITH INDIANA 46319 312-768-3400 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENT WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: SOLVENT, PAINT HAZARD CLASS: FLAMMABLE
UN or NA Number: UN1993 EPA HW Number: F005

WEIGHT FOR D.O.T. USE 26550 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. DR GAL. QUANTITY OF WASTE DELIVERED: 3245 0 GALLONS (Circle One) CU. YDS.
METHOD OF SHIPMENT (Circle One) (DRUMS 59) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND THE P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

[Signature]
(Authorized Signature)

DATE: 6/11/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [Signature]
(Authorized Signature)

DATE: 6/11/82

(2) _____
(Authorized Signature)

DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 6/11/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS, 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 6-11-82 To 126 RT-63 UCM 6-14-82
003761

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0634355

Authorization Number 8 13

ROCKOLA MFG. CO. 800 N. KEDZIE AVE 3126387600 0316000088
(Company Name) Address Phone Number Generator Number
CHICAGO IL 60651 ILD005163068
City State Zip EPA Number

WASTE HAULER(S)

STRAND TRUCKING CO. CRESTWOOD, IL. S.W.H. Registration Number 0311
Hauler Name Hauler Address 25 31

3123858440 ILT000646810
Phone Number EPA Number

AMERICAN CHEMICAL SERV. GRIFFITH, IN S.W.H. Registration Number 0024002
Hauler Name Hauler Address 32 38

2199244370 INDO16360265
Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV 420 S. COLFAX AVE 91808902
(Facility Name) Address 39 46

GRIFFITH IN 46319 2199244370 INDO16360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46

City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: FLAMMABLE LIQUID N.O.S. WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DDT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: HAZARD CLASS:

WASTE SOLVENTS IGNITABLE UN1993 F005
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE 10,800 LBS (circle one) TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 001350 0 GALLONS (Circle One) 2 CU. YDS. 1
47 52 53

METHOD OF SHIPMENT (Circle One) (DRUMS 27) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION David Fisher DATE: 10/14/82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) James Button DATE: 10 14 82
(Authorized Signature) 54 59

(2) DATE: 1 1 1
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: Michael E. P... DATE: 10 14 82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

To 124 R.T-63 GRAM 10.14.82

003762

610
8/81

BE COMPLETED BY
ASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0634356
7

Authorization Number 8 13

ROCKOLA MFG. CO. 800 N. KEDZIE AVE 312 638 7600 031 60 00088
(Company Name) Address Phone Number 14 Generator Number 24

CHICAGO IL 60651 ILD005163068
City State Zip EPA Number

WASTE HAULER(S)

STRAND TRUCKING CO. CRESTWOOD, IL. 312 385 58440 ILT000646810
Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 0311 25 31

AMERICAN CHEMICAL SERV. GRIFFITH, IN. 219 924 4370 IND016360265
Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 0024002 32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV 420 S. COLFAX AVE 918 08902
(Facility Name) Address Site Number 39 46
GRIFFITH IN 46319 219 924 4370 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number 39 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: 1,1,1-TRICHLOROETHANE WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENTS HAZARD CLASS: CHLORINATED UN 2831 F001
EPA HW Number

WEIGHT FOR D.O.T. USE 8,400 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 000700 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 14) TANK TRUCK OPEN TRUCK OTHER (Specify) UATN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION G. David Fisher DATE: 10/14/82
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) James Batt DATE: 10/14/82
(Authorized Signature) DATE: 10/14/82
(2) (Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY: HAZARDOUS WASTE SUBJECT TO FEE YES NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.
Michael O'Pry DATE: 10/14/82
(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 11877-63 11-23-82

003783

HAZARDOUS WASTE MANIFEST

ORIGINAL -- NOT NEGOTIABLE

12-005
MANIFEST DOCUMENT NUMBER

IND 10594525
SHIPPER NUMBER

Rogers Carriage Co.
NAME OF CARRIER

(SCAC)

7C D 006932438
CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
IND 10594525	IND 10594525	Rogers Carriage Co. 1237 S. 10th Ave. 2007 IN	
TRANSPORTER # 1	7C D 006932438	Rogers Carriage Co. 1237 S. 10th Ave. 2007 IN	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 1660265	AMERICAN CHEMICAL 4300 C. IFA GRIFFIN IN	3/9/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS / CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1			SOLVENT MIXTURE CLEANING FLUID				600	7.000		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
Signature _____

Subject to Section 7 of the conditions of this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
(Signature of Consignor) _____

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID (except when bills of lading is checked) Check box if charges are to be correct

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE : TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

12-006

MANIFEST DOCUMENT NUMBER

IND010594505

SHIPPER NUMBER

1LD006932438

CARRIER NUMBER

NAME OF CARRIER

(SCAC)

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND010594505	Rogers CARTRIDGE CO 1302 FIFTH AVE ROBY, IN 659-1562	
TRANSPORTER # 1	1LD006932438	ROGERS CARTAGE CO 1302 FIFTH AVE ROBY, IN	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	AMERICAN CHEMICAL 425 COLFAX GRIFFIN IN 984-4310	9/17/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1	X	1225	WASTE TOLUENE SOLVENT MIXTURE CLASS FLAMMABLE #11294				6ALS	1500		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call Shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

*Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID (except when box is checked) Check box if charges are to be collected

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

Wayne J. Stewart 9-17-82
GENERATOR'S SIGNATURE DATE

[Signature] 9/17/82
TSDF SIGNATURE DATE

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0640341

TO BE COMPLETED BY
WASTE GENERATOR

Authorization Number 997252
FED 1LD 05183298

ROLLPRINT PKG. PROD 2301 W. WABANSIAAN 6287700 0816000372
(Company Name) Address Phone Number Generator Number
CHICAGO ILLINOIS 60647
City State Zip EPA Number

WASTE HAULER(S)

HANDGREIB TRUK 3009 S SHIELDS CHICAGO, IL 31278423121
Hauler Name Hauler Address Phone Number
S.W.H. Registration Number IND 009842824
1CC2980

Hauler Name Hauler Address Phone Number S.W.H. Registration Number EPA Number

AMERICAN CHEMICAL 420 S. COLFAX INDIANA 46319 3127683400 IND 016360265
(Facility Name) Address City State Zip Phone Number Site Number
GRIFFITH

Alternate (Facility Name) Address City State Zip Phone Number Site Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK SOLVENTS WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DDT HAZARDOUS CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Ink Solvents HAZARD CLASS: Flammable by nos
UN or NA Number UN1953 EPA HW Number F003

WEIGHT FOR D.O.T. USE 8800 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 1210 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 22) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Leo Kucharski
(Authorized Signature)

DATE: 6/15/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [Signature]
(Authorized Signature)

DATE: 6/14/82

(2) _____
(Authorized Signature)

DATE: 1/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Frank Price
(Authorized Signature)

DATE: 6/15/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

On dock 6-15-82 To 210 RT-50
ERM 673-82
003100

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0579776

Authorization Number ~~995696~~

Rosetta Corp. 13853 W. Laurel Dr. 312-362-2628 0970800001
(Company Name) Address Phone Number Generator Number

Lake Forest, IL 60045 IL T180015182
City State Zip EPA Number

WASTE HAULER(S) 11022

Landgrebe Motor Valparaiso, In S.W.H. Registration Number
Hauler Name Hauler Address

Transit 312-312-3121 ND0024842824
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number

Phone Number EPA Number

American Chemical Serivice 420 S. Calfax Ave 91808902
(Facility Name) Address Site Number

Griiffith IND 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number

City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Waste Solvents WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid N.O.S. HAZARD CLASS: Flammable
UN 1993 F 0 0 5
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE 3600 LBS TONS (circle one) 500
WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 47 52
1 GALLONS (Circle One) 440
2 CU. YDS. 115

METHOD OF SHIPMENT (Circle One) (DRUMS 8) TANK TRUCK OPEN TRUCK OTHER (Specify) Truck

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION DATE: 7/15/82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) LMT IND 009842-824 DATE: 7/15/82
(Authorized Signature) (Authorized Signature) 7-15-82 ILL. 2980

(2) Curt Shady DATE: / /
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE
O.P. Murphy DATE: 7/16/82
(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS

5 To 124 E T-63 GRM 7.16.82
3 To 210 E T-50 GRM 7.16.82

003767

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0579772

Authorization Number 995696

ROSETTA CORP 13853 W. LAUREL DR 312/362-2628 0970800001
(Company Name) Address #60045 Phone Number 14 Generator Number 24
LAKE FOREST ILLINOIS 60045 ILL180015182
City State Zip EPA Number

WASTE HAULER(S)

LANDGREBE
MOTOR TRANSIT VALPARAISO, IN. S.W.H. Registration Number 25
Hauler Name Hauler Address Phone Number IND 00 9842824
EPA Number
Hauler Name Hauler Address S.W.H. Registration Number 32
Phone Number 781 EPA Number
Phone Number 4135(4) EPA Number

AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVE 91808902
(Facility Name) Address 39 Site Number 46
GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE
LIQUID N.O.S.

FLAMMABLE

UN1993

UN or NA Number

F 0 0 5

EPA HW Number

WEIGHT FOR D.D.T. USE 4800 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 47 52 1 GALLONS (Circle One) 2 CU. YDS. 550

METHOD OF SHIPMENT (Circle One) (DRUMS 10) TANK TRUCK OPEN TRUCK OTHER (Specify) TRUCK

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Kenneth Heisch
(Authorized Signature)

DATE: _____

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) *LMT C. July 4-20-82* IND 009842-824
(Authorized Signature) DATE: 1/1/82
(2) *ICC. 2980*
(Authorized Signature) DATE: 1/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

J. P. ...
(Authorized Signature)

DATE: 4/21/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637

**24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3 To 124 K.T-63 6RM 4-21-82

003768

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

135078
0579771

Authorization Number 995696

ROSETTA CORP 13853 W. LAUREL DR/3123622628 09708000014
(Company Name) Address Phone Number Generator Number

LAKE FOREST IL 60045 ILT180015182
City State Zip EPA Number

LANDGREBE WASTE HAULER(S)

MOTOR TRANSIT VALPARAISO, IN. Hauler Name Hauler Address

S.W.H. Registration Number 35 31

IND 09842824
EPA Number

Phone Number

Hauler Name Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

AMERICAN CHEMICAL SERVICE DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
420 S. COLFAX AVE
(Facility Name) Address

1808902
Site Number

GRIFFITH IN 46319 2199244370 IND 16360
City State Zip Phone Number EPA Number

Alternate (Facility Name)

Address

Site Number 46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS WASTE PHASE: LIQUID
Gaseous Solid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

LIQUID N.O.'S.

FLAMMABLE

UN1993
UN or NA Number

FC 25
EPA Number

WEIGHT FOR D.O.T. USE 520 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 47 1 GALLONS (Circle) 2 CU. YDS. 71 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number) 13

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

TRUCK

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORTATION AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) LMT (Authorized Signature)

IND 009842824
ILL. 2980

(2) C. Shuly (Authorized Signature)

1-21-82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE 1-21-82

COMMENTS OR SPECIAL INSTRUCTIONS.

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. 8/83

SITE COPY - PART 3

To 124 RT-63 GRM 1/25/82

003769

9370

HAZARDOUS WASTE MANIFEST

MANIFEST NUMBER

002023

GENERATOR	NAME	SM CORP	EPA ID NUMBER	IND074301268
	ADDRESS	P.O. BOX 1845, 53364 Marina Dr., Elkhart, IN. 46514	PHONE NUMBER	219-262-4571
FIRST TRANSPORTER	NAME	ASHLAND CHEMICAL	EPA ID NUMBER	IND016621476
	ADDRESS	1817 W. Indiana Ave., So. Bend, IN 46613	PHONE NUMBER	219-233-0033
SECOND TRANSPORTER (if applicable)	NAME		EPA ID NUMBER	
	ADDRESS		PHONE NUMBER	
TSD FACILITY	NAME	AMERICAN CHEMICAL SERVICE, INC.	EPA ID NUMBER	IND016360265
	ADDRESS	420 S. Colfax, Griffith, IN 46319	PHONE NUMBER	219-294-4370
ALTERNATE TSD FACILITY	NAME		EPA ID NUMBER	
	ADDRESS		PHONE NUMBER	

SHIPPING NAME/HAZARD CLASS	HAZARD ID NUMBER	QUANTITY	UNIT OF MEASURE	CONTAINER NUMBER	CONTAINER TYPE
FLAMMABLE LIQ. LIQUID	F003	900	gal.	18	55-gal. drums
		990			

EMERGENCY NOTIFICATION IN THE EVENT OF ACCIDENT OR SPILL, CALL (606) 324-1133, (CHEMTREC (800) 424-9300)

SPECIAL HANDLING INSTRUCTIONS

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U. S. Environment Protection Agency.

GENERATOR REPRESENTATIVE	NAME	SIGNATURE	DATE
	Lloyd A. Miller	<i>Lloyd A. Miller</i>	1-26-82

This is to certify acceptance of the hazardous waste shipment described above.

FIRST TRANSPORTER REPRESENTATIVE	NAME	SIGNATURE	DATE
	Harold Blawie	<i>Harold Blawie</i>	1/26/82

This is to certify acceptance of the hazardous waste shipment described above.

SECOND TRANSPORTER REPRESENTATIVE	NAME	SIGNATURE	DATE
	Harold Blawie	<i>Harold Blawie</i>	2/3/82

This is to certify acceptance of the hazardous waste described above for TREATMENT STORAGE DISPOSAL

TSD * FACILITY REPRESENTATIVE	NAME	SIGNATURE	DATE
	Bob Mauck	<i>Bob Mauck</i>	

* TREATMENT, STORAGE, DISPOSAL

TSD * Facility copy On dock 2/8/82 GRM
To 126R T-63 GRM 2/12/82

003770

9370

HAZARDOUS WASTE MANIFEST

MANIFEST NUMBER

002006

GENERATOR	NAME	SEM CORP	1219-268-4571	EPA ID NUMBER	IND074301268
	ADDRESS	P.O. BOX 1845, 53364 MARTIN DR., ELKHART, IN. 46514			PHONE NUMBER
FIRST TRANSPORTER	NAME	ASH AND CHEMICAL	VIA AIR	EPA ID NUMBER	IND015821078
	ADDRESS	1817 W. INDIANA AVE., ISO, IN. 46613			PHONE NUMBER
SECOND TRANSPORTER (if applicable)	NAME		1819-843-3151	EPA ID NUMBER	
	ADDRESS				PHONE NUMBER
TSD FACILITY	NAME	AMERICAN CHEMICAL SERVICE, INC.	1219-924-4370	EPA ID NUMBER	IND016360265
	ADDRESS	420 S. COLEMAN, GRIFFITH, IN 46319			PHONE NUMBER
ALTERNATE TSD FACILITY	NAME			EPA ID NUMBER	
	ADDRESS				PHONE NUMBER

SHIPPING NAME/HAZARD CLASS	HAZARD ID NUMBER	QUANTITY	UNIT OF MEASURE	CONTAINER
FLAMMABLE N.O.S. LIQUID	P003	8 drums	100 lb.	5 gal. drum
UN #1993		440	7600 lbs. total	
			(24)	

EMERGENCY NOTIFICATION IN THE EVENT OF ACCIDENT OR SPILL, CALL (606) 324-1133, (CHEMTREC (800) 424-9300)

SPECIAL HANDLING INSTRUCTIONS

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U. S. Environment Protection Agency.

GENERATOR REPRESENTATIVE	NAME	Thomas E. Lowenbar	SIGNATURE	[Signature]	DATE	7-28-82
This is to certify acceptance of the hazardous waste shipment described above.						
FIRST TRANSPORTER REPRESENTATIVE	NAME	[Signature]	SIGNATURE	[Signature]	DATE	7-28-82
This is to certify acceptance of the hazardous waste shipment described above.						
SECOND TRANSPORTER REPRESENTATIVE	NAME	[Signature]	SIGNATURE	[Signature]	DATE	
This is to certify acceptance of the hazardous waste described above for <input checked="" type="checkbox"/> TREATMENT <input type="checkbox"/> STORAGE <input type="checkbox"/> DISPOSAL						
TSD * FACILITY REPRESENTATIVE	NAME	[Signature]	SIGNATURE	T. DUNFEE	DATE	7/29/82

* TREATMENT, STORAGE, DISPOSAL

TSD * Facility copy

To 210 RT-50 GRUM 53.82

003771

STATE OF ILLINOIS

0689382

TO BE COMPLETED BY
WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number _____

Searle Laboratory 601 E. Kensington 3 1 2 2 5 5 0 3 0 0
(Company Name) Address Phone Number 14 Generator Number 24

Mount Prospect IL. 60056 ILD 0 0 0 6 7 2 3 9 4
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frank Inc. South Holland, IL. S.W.H. Registration Number 0079015
Hauler Name Hauler Address 25 31
31 2 5 9 6 3 3 7 7 ALD069506160
Phone Number EPA Number

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
American Chemical 620 S. Colfax
(Facility Name) Address 39 46
Griffith Ind. IND0816360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Chlorinated Solvent WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable HAZARD CLASS: 1993 F003
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE 2600 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 2600 LBS. 240 GALLONS (Circle One) CU. YDS. 47 52 53

METHOD OF SHIPMENT (Circle One) (DRUMS 5) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [Signature] DATE: 12-6-82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature] DATE: 12/06/82
(Authorized Signature) 54 59

(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARROUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature] DATE: 12/06/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

On dock 12.6.82 To 204 FT-50
GKM 12.30.82

003772

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0677095

TO BE COMPLETED BY
WASTE GENERATOR

Authorization Number 8 13

Service Coatings, Inc. 15600 Lathrop Ave. 312-596-8500 0311110010
(Company Name) Address Phone Number Generator Number
Harvey Illinois 60426 ILD005535190
City State Zip EPA Number

WASTE HAULER(S)

Strand Trucking 13642 Kenton 312-385-8440 0311012
Hauler Name Hauler Address Phone Number S.W.H. Registration Number 0024
Harvey Illinois 60426 ILT000646810
City State Zip Phone Number EPA Number
S.W.H. Registration Number 32 38

American Chemical Service P.O. Box 190 91808902
(Facility Name) Address Site Number
Griffith Indiana 46319 312-768-3400 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint Solvent WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.
(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION: Paint Solvent HAZARD CLASS: Flammable Liquid
UN or NA Number: NA-1993 EPA HW Number: F005

WEIGHT FOR D.O.T. USE: LBS TDNS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 47 52 53
1 GALLONS (Circle One)
2 CU. YDS.
METHOD OF SHIPMENT (Circle One) (DRUMS 40) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
Kathy Mattson
(Authorized Signature) DATE: December 27, 1982

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) R. P. ... (Authorized Signature) DATE: 12/27/82
(2) ... (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
Michael ... (Authorized Signature) DATE: 12/27/82

COMMENTS OR SPECIAL INSTRUCTIONS:

To 126 KT-63 6PM 12-27-82
003773

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0189981
7

Authorization Number 997562
8 13

Service Coatings, Inc.

15600 Lathrop Ave.

ILD005535190

(Company Name)

Address

0311110010 G
14 24

Harvey

Illinois

60426

Generator Number

City

State

Zip

WASTE HAULER(S)

ILT000646810

(1) Strand Trucking

13642 Kenton

S.W.H. Registration Number 00241002
25 31

Hauler Name

Hauler Address

(2) _____
Hauler Name

Hauler Address

S.W.H. Registration Number _____
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

P.O. Box 190

91808902
39 46
Site Number

(Facility Name)

Address

Griffith

Indiana
State

46319
Zip

TND 016360205

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint Solvent

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

UN 1993

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

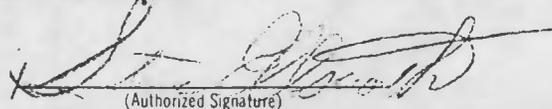
Paint Solvent

Flammable Liquid

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-15-82


(Authorized Signature)

WASTE HAULER*

12000 lbs

QUANTITY OF WASTE RECEIVED: 1650
47 52

1 GALLONS (Circle One)
2 CU. YDS. _____
52

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER UAM (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) 
(Authorized Signature)

DATE: 3/15/82
54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:


(Authorized Signature)

DATE: 3/15/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

* 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

Ondock 3/15/82 6:24M
TO 125KT-63 6:24M 3/19/82

003774

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0189982
1 7

Authorization Number 997562
8 13

Service Coatings, Inc.

15600 Lathrop Ave.

ILD005535190

(Company Name)

Address

03111100010
14 24

1 Harvey
City

Illinois 60426
State Zip

312-735-7378

Generator Number

WASTE HAULER(S)

ILTO00646810

(1) Strand Trucking
Hauler Name

13642 Kenton
Hauler Address

S.W.H. Registration Number 0024900
25 31

(2) Hauler Name

312-385-8440
Hauler Address

S.W.H. Registration Number
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

P.O. Box 190

IND016360265

(Facility Name)

Address

01808902
39 46

Griffith
City

Indiana 46319
State Zip

317-500-7683400

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint Solvent

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Paint Solvent

Flammable Liquid

UN 1993

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-27-82

Kenny Mattson
(Authorized Signature)

K078

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 001705
57

1 GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

31 DRUMS

TANK TRUCK

OPEN TRUCK

OTHER 444 (Specify) 100 1,390

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *[Signature]*
(Authorized Signature)

DATE: 5/27/82

(2) *[Signature]*
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

DATE: 5/27/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

SITE COPY - PART 3

See

On dock 5-27-82 6PM
To 124R T-63 6PM 6-1-82

003775

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0367738
1 7

Authorization Number 9 9 7 5 6 2
8 13

Service Coatings, Inc. 15600 Lathrop Ave.
(Company Name) Address
Harvey Illinois 60426
City State Zip

ILD005535190
03111100010G
14 Generator Number 24

Strand Trucking 13642 Kenton
Hauler Name Hauler Address

ILTO000646810
S.W.H. Registration Number 002400
25 31

Hauler Name 385-3440
Hauler Address

S.W.H. Registration Number 32 38

AMERICAN CHEMICAL SERVICE P.O. Box 190
(Facility Name) Address
Griffith Indiana 46319
City State Zip

IND016360265
91808902
39 Site Number 46

312-768-3400

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint Solvent WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: HAZARD CLASS:

Paint Solvent Flammable Liquid

WEIGHT FOR D.O.T. USE 12,150 LBS (circle one) TONS (circle one)

144,493

F005

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 0.01485
47 52

1 GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 06-28-82

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jim Butcher
(Authorized Signature)

DATE: 6/28/82
54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael P. Dwyer
(Authorized Signature)

DATE: 6/28/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

TO 124RT-63 GRM 6-28-82

SITE COPY - PART 3

003170

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0367739

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997562

Service Coatings, Inc.
(Company Name)
Harvey
City

15600 Lathrop Ave.
Address 312-596-8500
Illinois 60426
State Zip

IL D 0 0 5 5 3 5 1 9 ()
0 3 1 1 1 1 0 0 0 1 0 G
Generator Number

Strand Trucking
Hauler Name

13642 Kenton
Hauler Address
312-385-8440
Hauler Address

IL T 0 0 0 6 4 6 8 1 ()
S.W.H. Registration Number 0024002
S.W.H. Registration Number

American Chemical Service
(Facility Name)
Griffith
City

P.O. Box 190
Address 312-768-3400
Indiana 46319
State Zip

IND 0 1 6 3 6 0 2 6
9 1 8 0 8 9 0 2
Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint Solvent

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Paint Solvent

Flammable Liquid

WEIGHT FOR D.O.T. USE 14,850 LBS TONS (circle one)

UN 1993

Fuels

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 001815

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

33 DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify) MAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-5-82

Kathy Mattson
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Joan Balth
(Authorized Signature)

DATE: 8/5/82

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Fudge
(Authorized Signature)

DATE: 8/5/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

70124E 7-63 6PM 8582

SITE COPY - PART 3

003777

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0677092

TO BE COMPLETED BY
WASTE GENERATOR

Authorization Number

ILD005535190

Service Coatings, Inc.

15600 Lathrop Ave

312-596-8500

0311110010

(Company Name)

Address

Phone Number

14

Generator Number

24

Harvey

Illinois

60426

City

State

Zip

EPA Number

WASTE HAULER(S)

ILD069506160

Mr. Frank, Inc.

201 - 155th St., So. Holland, Il.

S.W.H. Registration Number 0079001

Hauler Name

Hauler Address

25

31

312-596-3377

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32

38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

P.O. Box 190

91808902

(Facility Name)

Address

39

Site Number

46

Griffith

Indiana

46319

219-924-4370

IND01636026

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Waste Paint Solvent

WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Paint Solvent

Flammable Liquid

NA 1993

UN or NA Number

EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 001500
47 52 2 CU. YDS. 53

GALLONS (Circle One)

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Latan O. Patton
(Authorized Signature)

DATE: 9-29-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Ronald Bridgman*
(Authorized Signature)

DATE: 9/29/82

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

J. Proff
(Authorized Signature)

DATE: 9/29/82

COMMENTS OR SPECIAL INSTRUCTIONS:

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0677094

Authorization Number 8 13

Service Coatings, Inc. 15600 Lathrop Ave. 312-596-8500 0311110010
(Company Name) Address Phone Number 14 Generator Number 24
Harvey Illinois 60426 ILD005535190
City State Zip EPA Number

WASTE HAULER(S)
Strand Trucking 13642 Kenton
Hauler Name Hauler Address
312-385-8440 ILT000646810
Phone Number EPA Number
S.W.H. Registration Number 25 31
0024002
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
American Chemical Service P.O. Box 190 91808902
(Facility Name) Address 39 Site Number 46
Griffith Indiana 46319 312-768-3400 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint Solvent WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Paint Solvent HAZARD CLASS: Flammable Liquid
UN or NA Number: NA-1993 EPA HW Number: F005

WEIGHT FOR D.O.T. USE 33,500 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 602585 GALLONS (Circle One) 2 CU. YDS.
METHOD OF SHIPMENT (Circle One) (DRUMS 47) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Kathy J. Patton DATE: October 20, 1982
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Steve Shan DATE: 10/20/82
(Authorized Signature) 54 59
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: Medical Bldg DATE: 10/20/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS _____

STATE OF ILLINOIS

0618502

TO BE COMPLETED BY
WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

Authorization Number 998433

Sherwin Williams Co.
Transportation Department

SPECIAL WASTE HAULING MANIFEST

11541 S. Champlain Ave. 312/821-3809 0316000020

(Company Name) Chicago, Address Illinois Phone Number 60628 Generator Number IR ILD 0085456439
City State Zip EPA Number

WASTE HAULER(S)

Hauler Name Mr. FRANKS, INC. Hauler Address 201 W. 155th ST. M S.W.H. Registration Number 0079009
SOUTH HOLLAND, IL. Phone Number 312/596-3377 EPA Number ILD 069306160

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service Address P.O. Box 190 Site Number 91308902
(Facility Name) City Griffith, State Ind. Zip 46319 Phone Number 312/768-3400 EPA Number IND 016360265

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE PAINT WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE HAZARD CLASS. UN1263 (Liquid, Gaseous, Solid) F005
EPA HW Number

WEIGHT FOR D.O.T. USE 005000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005000 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [Signature] DATE: 5-18-82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

[Signature] DATE: 05/18/82
(Authorized Signature) (1) (2) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature] DATE: 5/18/82
(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS:

T0123K T-63 6PM 5-18-82
003780

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760

0269639

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998111

SIMKINS (Company Name) 5701 ODGEN AVE Address KICERO City ILL State 624 Zip

0310510085 Generator Number

MR. FRANK, JR. (Hauler Name) 201 W. 153rd St. (Hauler Address) SO. HOLLAND IL. (Hauler Address)

S.W.H. Registration Number 0679018 S.W.H. Registration Number 1206958616

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERV (Facility Name) 430 SO. CALFAK AVE Address BRIEFTH City IND State 43619 Zip

91808902 Site Number IND 016360265

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENT WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: WASTE SOLVENT

HAZARD CLASS: FLAMMABLE

WEIGHT FOR D.O.T. USE LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/12/82 (Authorized Signature)

UN 1992 2005

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) CE Milburn (Authorized Signature) (2) (Authorized Signature)

DATE: 05 12 82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 5/12/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

To 112 R T-63 60M 5.12.82 To 109E

SITE COPY - PART 3

003781

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

0116009

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

Authorization Number 9 9 7 1 1 0

US EPA No. ILD005140108

Specialty Coatings Co. 2500 Delta Lane
(Company Name) Address

0 3 1 4 4 0 0 0 2 9
Generator Number

Elk Grove Village, Illinois 60007
City State Zip

WASTE HAULER(S) 312-596-3377

(1) Mr. Frank 201 W. 155th St.
Hauler Name Hauler Address

S.W.H. Registration Number 0 0 7 9 / 0 2 1
US EPA No. ILD 069506160

SOUTH Holland IL.

(2) _____
Hauler Name Hauler Address

S.W.H. Registration Number _____
Site Number _____

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Sertice 420 S. Colfax
(Facility Name) Address

9 1 8 0 8 9 0 2
Site Number

Griffith Indiana 46319
City State Zip

US EPA No. IND 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint Solvent UN 1993

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent, N.O.S.

FOOS

Flammable Liquid
UN 1993

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: May 25, 1982

Lucille Bobbitt
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0 0 5 5 0 0
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Donald H. Bult
(Authorized Signature)

DATE: 0 5 / 2 5 / 8 2
54 59

(2) _____
(Authorized Signature)

DATE: ____ / ____ / ____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Donfee
(Authorized Signature)

DATE: 5 25 82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

TO 125RT-63 GRM 5-25-82-

003782

STATE OF ILLINOIS

TO BE COMPLETED BY
WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0621203

Authorization Number 993637

STAR CHEMICAL CO., INC. 360 SHOREDOR. 312 654 8650 0434520001 G
(Company Name) Address Phone Number 14 Generator Number 24

HINSDALE ILL. 60521 ILLD005197652
City State Zip EPA Number

WASTE HAULER(S)

TECHNICAL PETROLEUM CO. 6233 N. PULASKI S.W.H. Registration Number 0625001
Hauler Name Hauler Address 25 31

3124635200 ILLD005441696
Phone Number EPA Number

CHICAGO ILL. 60646 S.W.H. Registration Number
Hauler Name Hauler Address 32 38

Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVE. 91808902
(Facility Name) Address 39 Site Number 46

GRIFFITH INDIANA 46319 3127683400 INDO16360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46

City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ORGANIC SOLUENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

ACETONE

FLAMMABLE

UN1090
UN or NA Number

F003
EPA HW Number

WEIGHT FOR
D.D.T. USE

400

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. DR GAL

QUANTITY OF WASTE DELIVERED: 220
47 52

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS 4)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Harold M. Olson
(Authorized Signature)

DATE: 6-9-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) David M. Olson
(Authorized Signature)

DATE: 6/14/82
54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature)

DATE: 6/15/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0621204

TO BE COMPLETED BY
WASTE GENERATOR

Authorization Number 888430

STAR CHEMICAL CO., INC., 360 SHORE DR. 312 854 8650 0434520001 6
(Company Name) Address Phone Number 14 Generator Number 24
HINSDALE IL 60521 ILD005197652
City State Zip EPA Number

WASTE HAULER(S)

TECHNICAL PETROLEUM CO., 6233 N. PULASKI S.W.H. Registration Number 0625002
Hauler Name Hauler Address 25 31

312 463 5200 ILD005441696
Phone Number EPA Number

CHICAGO, ILL 60646 S.W.H. Registration Number _____
Hauler Name Hauler Address 32 38

Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVE. 91808902
(Facility Name) Address 39 Site Number 46

GRIFFITH IND. 46319 312 768 3400 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46

City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR.

WASTE NAME: ORGANIC SOLVENTS WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION: ACETONE HAZARD CLASS: FLAMMABLE UN1090 F003
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE 4000 LBS / TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 550 1 GALLONS (Circle One) / 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 10) TANK TRUCK OPEN TRUCK OTHER (Specify) _____
Number

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Harold M. Olson DATE: 11-4-82
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

Julean DATE: 11, 4, 82
(Authorized Signature) 54 59
(Authorized Signature) DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: Frank James Price DATE: 11/17/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: _____

T02047E 7-50 GPM

003784

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0083337
1 7

Authorization Number 993637
8 13

STAR CHEMICAL CO. INC. 360 SHORE DR.
(Company Name) Address
HINSDALE ILLINOIS 60521
City State Zip

ILD. 005197652
0434520001 6
14 Generator Number 24

WASTE HAULER(S)

(1) TECHNICAL PETROLEUM CO. 6233 N. PULASKI
Hauler Name Hauler Address
CHICAGO, ILL. 60646

S.W.H. Registration Number 0625001
25 31

(2) _____
Hauler Name Hauler Address

S.W.H. Registration Number _____
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVE.
(Facility Name) Address
GRIFFITH INDIANA 46319
City State Zip

91808902
39 Site Number 46

IND 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: METHYL ETHYL KETONE

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARDOUS
FLAMMABLE

HAZARD CLASS:

HAZARDOUS
FLAMMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-17-82

Harold M. Olson
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: _____
47 52 53

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Technical Petroleum (7)
(Authorized Signature)

DATE: 2/18/82
34 59

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature)

DATE: 2/23/82
85

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

On dock 2/23/82
To 210 TR T-50 6RM 2/23/82

003785

WASTE DISPOSAL MANIFEST

 Act 64 Waste (HAZARDOUS)

 Act 136 Waste

 Other

MI0200356

IDENTIFICATION	Generator's Name Steelcase Inc.	Primary Transporter's Name Valley City Refuse Inc.	Treatment, Storage or Disposal Facility American Chemical Service Inc.
	Site Address Attn. David Rinard P. O. Box 1967 Grand Rapids, MI 49501	Transporters Address 2650 Thornwood S. W. Wyoming, MI. 49509	Facility Address 420 S. Colfax Ave. Griffith, Indiana 46319
	Phone Number (616) 247-2996	Phone Number (616) 538-8499	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MID006016547	Transporter's EPA I.D. Number MID055955373	Facility Site EPA I.D. Number IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name)	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container				Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge					
1.	Flammable Liquid N.O.S.	Flammable	UN 1993	07	1	CT						X	3000	GAL	F 0 0 3
2.															
3.															
4.															
5.															
6.															

COMMENTS: Include Safety precautions and special handling instructions.
Keep open flame away. Clean-up spills with non-sparking tools.
F005 (Still Bottoms)

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: *David Rinard*
 Date Shipped: **MO. DAY YEAR**
10 01 82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1 639**
 Transporter Signature: *Burt R*
 Date(s) Received: **10 1 82**

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: *[Signature]*
 Facility Site EPA I.D. Number: **IND0116360265**
 Date Received: **10 1 82**

Describe any significant discrepancies between manifest and shipment:
 Was a Surcharge Assessed? Yes No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

To 204 RT-50 6 PM 10 1 82

TSDF COPY

000000

WASTE DISPOSAL MANIFEST

 Act 64 Waste (HAZARDOUS)

 Act 136 Waste

 Other

MI0200350

Generator's Name Steelcase Inc.	Primary Transporter's Name Valley City Refuse Inc.	Treatment, Storage or Disposal Facility American Chemical Service Inc.
Site Address Attn. David Rinard P. O. Box 1967 Grand Rapids, MI. 49501	Transporter's Address 2650 Thornwood S. W. Wyoming, MI. 49509	Facility Address 420 S. Colfax Ave. Griffith, Indiana 46319
Phone Number 616 247-2996	Phone Number 616 538-8499	Phone Number 219 924-4370
Generator's Site EPA I.D. Number MID006016547	Transporter's EPA I.D. Number MID055955373	Facility Site EPA I.D. Number IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./NA No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number	
					No.	Type	Solid	Liquid	Gas	Sludge				
1.	Flammable Liquid N.O.S.	Flammable	UN 1993	07	1	CT					X	198.90	GAL	F 0 0 3
2.														
3.														
4.														
5.														
6.														

Include Safety precautions and special handling instructions.

Keep open flame away. Clean-up spills with non-sparking tools.

F005 (Still Bottoms)

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.		Generator Signature <i>Dany D. Egerton</i> ① MGR-ENVIRONMENTAL	Date Shipped MO. DAY YEAR 1/10/82	
HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.		Transporter Vehicle I.D. No. No. 1 639 Subsequent Transporter Vehicle I.D. No's	Transporter Signature <i>Russell [Signature]</i> ② Subsequent transporter(s) Signature(s) ③	Date(s) Received 10/2/82

If the shipment cannot be delivered, describe the reasons for non-delivery:

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature ④ <i>[Signature]</i> Facility Site EPA ID Number IND016360265	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 1/28/82
---	--	---	---------------------------------

Describe any significant discrepancies between manifest and shipment:

Was a Surcharge Assessed? Yes No

SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 424-8802 24 HOURS PER DAY.

TO 211 RT-50 610M 11-2-82 TSDF COPY

GENERATOR COMPLETES

HAULER COMPLETES

IDENTIFICATION

WASTE INFORMATION

COMMENTS

001300

WASTE DISPOSAL MANIFEST

 Act 84 Waste (HAZARDOUS)

 Act 136 Waste

 Other

MI0200354

Generator's Name Steelcase Inc.	Primary Transporter's Name Valley City Refuse Inc.	Treatment, Storage or Disposal Facility American Chemical Service Inc.
Site Address Attn. David Rinard P. O. Box 1967 Grand Rapids, MI 49501	Transporter's Address 2650 Thornwood S. W. Wyoming, MI. 49509	Facility Address 420 S. Colfax Ave. Griffith, Indiana 46319
Phone Number (616) 247-2996	Phone Number (616) 538-8499	Phone Number (219) 924-4370
Generator's Site EPA ID Number MI0006016547	Transporter's EPA ID Number MI055955373	Facility Site EPA ID Number IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number	
					No.	Type	Solid	Liquid	Gas	Sludge				
1.	Flammable Liquid N.O.S.	Flammable	U.N. 1993	07	1	CT					X	53500	GAL	F003
2.														
3.														
4.														
5.														
6.														

COMMENT 9: Include Safety precautions and special handling instructions.
**Keep open flame away. Clean-up spills with non-sparking tools.
F005 (Still Bottoms)**

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Generator Signature <i>David Rinard</i>	Date Shipped MO. DAY YEAR 11/11/82
	① Environmental Engineer	Date(s) received 11/11/82
	Transporter Signature <i>Butch Rozema</i>	②
If the shipment cannot be delivered, describe the reasons for non-delivery.	Subsequent transporter(s) signature(s)	③
	Vehicle I.D. No's	

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes, and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature <i>[Signature]</i>	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 11/11/82
	Facility Site EPA ID Number IND016360265		
Describe any significant discrepancies between manifest and shipment			

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TO 210 RT-50 GRAL 11/11/82
TSDF COPY

901300

WASTE DISPOSAL MANIFEST

 Act 64 Waste (HAZARDOUS)

 Act 136 Waste

 Other

MI 0200351

IDENTIFICATION	Generator's Name Steelcase, Inc.	Primary Transporter's Name Valley City Refuse, Inc.	Treatment, Storage or Disposal Facility American Chemical Service Inc.
	Site Address Attn. David Rinard P. O. Box 1967 Grand Rapids, MI 49501	Transporters Address 2650 Thornwood S. W. Wyoming, MI. 49509	Facility Address 420 S. Colfax Ave. Griffith, Indiana 46319
	Phone Number 616 247-2996	Phone Number 616 538-8499	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MID006016547	Transporter's EPA I.D. Number MID055955373	Facility Site EPA I.D. Number IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name)	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container				Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge					
1.	Flammable Liquid N.O.S.	Flammable	UN 1993	07	1	CT							155010	GAL	F 003
2.															
3.															
4.															
5.															
6.															

COMMENTS: Include Safety precautions and special handling instructions.
Keep open flame away. Clean-up spills with non-sparking tools.
F005 (Still Bottoms)

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: *David Rinard*
 Date Shipped: **11/15/82**
 Environmental Engineer

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1 638**
 Subsequent Transporter Vehicle I.D. No's

Transporter Signature: *Butch Rogema*
 Date(s) Received: **11/15/82**
 Subsequent transporter(s) signature(s)

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: *J. Dunfee*
 Facility Site EPA I.D. Number: **IND016360265**
 Date Received: **11/15/82**
 Accepted
 Rejected

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?
 Yes
 No

TO BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-6752 PER DAY.

To 211 RT-50 6PM 11/15/82 TSDF COPY

003789

WASTE DISPOSAL MANIFEST

 Act 64 Waste (HAZARDOUS)

 Act 136 Waste

 Other

MI0200355

Generator's Name Steelcase Inc.	Primary Transporter's Name Valley City Refuse Inc.	Treatment, Storage or Disposal Facility American Chemical Service Inc.
Site Address Attn. David Rinard P. O. Box 1967 Grand Rapids, MI. 49501	Transporter's Address 2650 Thornwood S. W. Wyoming, MI. 49509	Facility Address 420 S. Colfax Ave. Griffith, Indiana 46319
Phone Number 616 247-2996	Phone Number 616 538-8499	Phone Number 219 924-4370
Generator's Site EPA I.D. Number MID006016547	Transporter's EPA I.D. Number MID055955373	Facility Site EPA I.D. Number IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form			Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas			
1.	Flammable Liquid N.O.S.	Flammable	U.N. 1993	017	1	CT				X	2500	GAL F 0 0 3
2.												
3.												
4.												
5.												
6.												

Include Safety precautions and special handling instructions:
Keep open flame away. Clean-up spills with non-sparking tools.
F005 (Still Bottoms)

TRANSPORTER COMPLETES

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

If the shipment cannot be delivered, describe the reasons for non-delivery:

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

Describe any significant discrepancies between manifest and shipment:

Generator Signature <i>David Rinard</i>	Date Shipped MO. DAY YEAR 12/15/82
① Environmental Engineer	Date(s) Received 12/15/82
Transporter Signature <i>Butch A</i>	
② Subsequent transporter(s) signature(s)	
③ Vehicle I.D. No's	
Signature <i>[Signature]</i>	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected
State EPA I.D. Number IND016360265	Date Received 12/15/82
Was a Surcharge Assessed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TSDF COPY TO 1187 T-50 6PM 12-15-82

003190

HAZARDOUS WASTE MANIFEST

00101

MANIFEST DOCUMENT NUMBER

MR. FRANK INC
NAME OF CARRIER

(SCAC)

SHIPPER NUMBER

0011016

CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
	IND006390660	SWISS PLYWOOD CORP TELL CITY, INDIANA 345 7th	11-3-82
TRANSPORTER # 1	ILD 069506160	MR. FRANK INC SOUTH HOLLAND, IL 201 W 155th	
TRANSPORTER # 2 (If required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICE INC COLFAX AVE GRIFFITH, INDIANA 46319	11-4-82
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1 tank truck	HM P-005	Flammable liquids N.O.S.	1993			gals	4,850		

SPECIAL HANDLING INSTRUCTIONS

If an RO commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID except when box or right is checked. Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

00100

MANIFEST DOCUMENT NUMBER

MR. FRANK INC

NAME OF CARRIER

SHIPPER NUMBER

CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
	IND006390660	SHISS PLYWOOD CORP 345 7th TELL CITY, INDIANA	10-18-82
TRANSPORTER # 1	ILD 069506160	MR FRANK INC 201 W 155th SOUTH HOLLAND, IL	
TRANSPORTER # 2 (If required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICE INC COLFAX AVE GRIFFITH, INDIANA 46319	
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or MAX	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WTVOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1 tank truck	XX	F-005	Flammable liquids N.O.S.	1993			gals	2,000		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

TOTAL CHARGES: \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:
\$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES

FREIGHT PREPAID except when box at right is checked Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

6

HAZARDOUS WASTE MANIFEST

00100

MANIFEST DOCUMENT NUMBER

MR. FRANK INC

NAME OF CARRIER

(SCAC)

SHIPPER NUMBER

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND006390660	SWISS PLYWOOD CORP 345 7th TELL CITY, INDIANA	10-18-82
TRANSPORTER # 1	ILD 069506160	MR FRANK INC 201 W 155th SOUTH HOLLAND, IL	
TRANSPORTER # 2 (if required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICE INC COLFAX AVE GRIFFITH, INDIANA 46319	10/19/82
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE IO #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or XXXX	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1 tank truck	XX	F-005	Flammable liquids N.O.S.	1993			gals	2,000		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID Check box if charges are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

(Signature of Consignor)

Signature

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

5

HAZARDOUS WASTE MANIFEST

0006

MANIFEST DOCUMENT NUMBER

V-10006

SHIPPER NUMBER

Thomas Solvent Company

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	OH0002493039	Teleflex, 1265 Industrial Ave. Van Wert, Ohio 45891 (Ph: 419/238-0070)	
TRANSPORTER # 1	MID03993902	Thomas Solvent, 5605 Plane View Dr., Ft. Wayne, Ind. 46825 (Ph. 219/482-9638)	
TRANSPORTER # 2 (if required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND0163602655	American Chemical Service, 420 S. Salfax, Griffin, Ind. 46319 (Ph. 219/924-4370)	4/14
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
6 (55 gal drums)		F 0 0 5	Waste Compound Paint Thinning Liquid	1142	6			330 gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other OOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrex 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "CDD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID Check box if charges are to be collect
except when box at right is checked

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE — TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

0008

MANIFEST DOCUMENT NUMBER

V-10008

SHIPPER NUMBER

Thomas Solvent

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
	OH0002493039	Teleflex 1265 Industrial Ave., Van Wert, Ohio 45891 1-419/238-0070	
TRANSPORTER # 1	MID03993902	Thomas Solvent 5605 Plane View Dr. Ft. Wayne, Ind. 46825 1-219/482-9638	
TRANSPORTER # 2 (If required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND0163602655	American Chemical Service 420 S. Colfax Griffin, Ind. 46319 1-219/924-4370	10/21/82
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
7 55 gal drums		F 0 0 5	Waste Paint Thinning Compound	1142	7	-		385 gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RO commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID except when box is checked Check box if charges are to be correct

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

Signature

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

0007

MANIFEST DOCUMENT NUMBER

V-10007

SHIPPER NUMBER

Thomas Solvent Company

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
	OHD002493039	Teleflex, 1265 Industrial Ave., Van Wert, OH 45891 Ph: 419/238-0070	
TRANSPORTER # 1	MID03993902	Thomas Solvent, 5605 Plane View Dr., Ft. Wayne, Ind. 46825 Ph: 219/482-9638	
TRANSPORTER # 2 (if required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND0163602655	American Chemical Service, 420 S. Colfax, Griffin, Ind. 46319 Ph: 219/924-4370	2/14
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
11 (55 gal drums)		F 0 0 5	Waste Compound Paint Thinning Liquid	1142	11			605 gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

\$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

(Signature of Consignor)

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

(Signature of Consignor)

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID Check one if charges are to be collect
RIGHT IS CHECKED

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

William E. Meyer 4/20/82
GENERATOR'S SIGNATURE DATE

TRANSPORTER #1 SIGNATURE & DATE: *William E. Meyer* 7-14-82
TRANSPORTER #2 SIGNATURE & DATE (if required):
This is to certify acceptance of the hazardous waste for treatment, storage or disposal.
TSDf SIGNATURE DATE

5

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS)

Act 136 Waste (OTHER)

MI 0003147

IDENTIFICATION	Generator's Name Trendway Corporation	Primary Transporter's Name Valley City Refuse Disposal, Inc.	Treatment, Storage or Disposal Facility American Chemical Service, Inc.
	Site Address 13467 Quincy Street Holland, MI 49423	Transporters Address 2650 Thornwood, S.W. Wyoming, MI 49509	Facility Address 420 S. Colfax Griffith, IN 46319
	Phone Number (616) 399-3900	Phone Number (616) 538-8499	Phone Number (210) 924-4370
	Generator's Site EPA I.D. Number MI D 043 683 515	Transporter's EPA I.D. Number MI D 055 855 373	Facility Site EPA I.D. Number IND 016 360 265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Weight or Volume	Units	Hazardous Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	Waste Methyl Ethyl Ketone	Flammable Liquid	1193	08	6	Dr		X			330	Gal	F005
2.													
3.													
4.													
5.													
6.													

COMMENTS: Include Safety precautions and special handling instructions.

TRANSPORTER COMPLETES	<p>GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.</p>	Generator Signature <i>Robert Wayne Burns</i>	Date Shipped MO. DAY YEAR 1 22 82	
	<p>HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.</p>	Transporter Vehicle I.D. No. No. 1 640 Subsequent Transporter Vehicle I.D. No's	Transporter Signature <i>Arnold Dykstra</i> Subsequent transporter(s) signature(s)	Date(s) Received 1 22 82
	If the shipment cannot be delivered, describe the reasons for non-delivery.			

TSDF COMPLETES	<p>TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.</p>	TSDF Signature <i>Frank Price</i> Facility Site EPA I.D. Number IND 016 360 265	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 12 22 82
	Describe any significant discrepancies between manifest and shipment.			

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800-294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800-424-8802

To 204RT-SD SRM 12-28-82 TSDF COPY On dock

7-1-000

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0433828

Authorization Number 995805

U.S. PACTING INC. 440 DENNISTON 3124595000 0314970036
(Company Name) Address Phone Number Generator Number
WHEELING ILL 60090
City State Zip EPA Number

WASTE HAULER(S)

MR FRANK JAK 201 W 155 TH ST. 5963907 6079009
Hauler Name Hauler Address Phone Number S.W.H. Registration Number
SOUTH HOLLAND ILL.
Hauler Address
IL 069506160
S.W.H. Registration Number
Phone Number EPA Number

AMERICAN CHEMICAL 420 SOUTH COLFAX IND 3127683400 91808902
(Facility Name) Address City State Zip Phone Number Site Number
420 SOUTH COLFAX IND IND 0616360265
Alternate (Facility Name) Address City State Zip Phone Number Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENT PAINT SOLVENTS WASTE PHASE: LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DDT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION: PAINTS SOLVENTS FLAMMABLE LIQUID HAZARD CLASS: UN-1263
EPA HW Number: 7005

WEIGHT FOR D.O.T. USE: _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004500
METHOD OF SHIPMENT (Circle One): (DRUMS _____) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION. Donald F. Wicker DATE: 5/6/82
(Authorized Signature)

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.
(1) Michael Smith DATE: 05/06/82
(Authorized Signature) (54) (59)
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY: _____ HAZARDOUS WASTE SUBJECT TO FEE: YES _____ NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.
Donald F. Wicker DATE: 5/6/82
(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL 2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6760 SPECIAL WASTE HAULING MANIFEST

0577701

Authorization Number

U.S. PACKAGING H40 DENNIST M 3124595000 0.314970036 G (Company Name) Address Phone Number Generator Number WHEELING ILL 60090 City State Zip EPA Number

MR FRANK INC. 201 WISS TH ST WASTE HAULER(S) AMER. CHEM. SO. HOLLAND IL. Hauler Name Hauler Address S.W.H. Registration Number 0079009 5963377 (512) Phone Number 14D069506160 EPA Number S.W.H. Registration Number 32

AMER. CHEM H20 So. COIFAX DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE 91808902 (Facility Name) Address Site Number H20 So. COIFAX IND. 3127683400 14D16360265 City State Zip Phone Number EPA Number Alternate (Facility Name) Address Site Number City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR WASTE NAME: ORGANIC SOLVENTS LIQ WASTE PHASE: LIQUID (Liquid, Gaseous, Solid) THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: SHIPPING DESCRIPTION: PAINT SOLVENTS HAZARD CLASS: FLAMMABLE UN 1263 FOOS EPA HW Number WEIGHT FOR D.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. DR GAL. QUANTITY OF WASTE DELIVERED: 004800 1 GALLONS (Circle One) 2 CU. YDS. METHDD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A. I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Signature) DATE: 10-26-82

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED (1) (Signature) DATE: 10/26/82 (2) (Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO X I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: (Signature) DATE: 10/26/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675 DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR REV # 3

SITE COPY - PART 3 TO 210K; 212K T-50 GPM 10.26.82 003799

STATE OF ILLINOIS

0615352
1 7

COMPLETED BY
WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number 8 13

U.S. STEEL CORP - DANFORTH 1700 E. 122ND ST. 312 645 900 0316000086 G
(Company Name) Address Phone Number 14 24
Generator Number
IL0000814665
EPA Number

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE 420 S. COLFAX 0024001
Hauler Name Hauler Address S.W.H. Registration Number 25 31
GRIFFITH, INDIANA 46319 219 924 4370 IN0016360265
Phone Number EPA Number

STRAND TRUCKING 13642 KENTON 312 385 8440 167000646840
Hauler Name Hauler Address S.W.H. Registration Number 32 38
CRESTWOOD, ILL. 60445 Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 S. COLFAX 91808902
(Facility Name) Address Site Number 39 46
GRIFFITH INDIANA INDIANA 46319 312 7683400 IN0016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number 39 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION: HAZARD CLASS: UN1993 F003
FLAMMABLE LIQUID NOS. FLAMMABLE LIQUID UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE 19000 TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 001900 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 33) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION DATE: 12/17/82 (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature)
(2) (Authorized Signature)

DATE: 12/17/82
DATE: 1/1/83

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 12/17/82

COMMENTS OR SPECIAL INSTRUCTIONS:

On dock 12-17-82 T0204KT-50
EPM 12-28-82

003800

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0615353
1 7

Authorization Number _____ 8 _____ 13

U.S. STEEL SUPPLY 1701 E 122ND ST. 3126465900 0316000086 6
PAINT (Company Name) MILL Address Phone Number 14 Generator Number 24
City State Zip EPA Number

WASTE HAULER(S)

AMERICAN CHEMICAL 420 S. COLFAX S.W.H. Registration Number 0311012
SERVICE (Hauler Name) GRIFFITH, INDIANA 46319 25 31
2199244370 IN0016360265
Phone Number EPA Number

STRAND TRUCKING 13642 KENTON S.W.H. Registration Number _____
CRESTWOOD, ILL. (Hauler Name) 3123858440 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 S. COLFAX 91808902
(Facility Name) Address 39 Site Number 46
GRIFFITH, INDIANA INDIANA 46319 3127688400 IN0016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: ORGANIC SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQUID NOS. HAZARD CLASS: UN 1993 F003
UN or NA Number EPA HW Number

WEIGHT FOR O.D.T. USE 9650 105 TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 000880 1 GALLONS (Circle One)
0 47 52 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One) (DRUMS) 16 TANK TRUCK OPEN TRUCK (OTHER) (Specify) VAN
Number

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [Signature] DATE: 12/23/82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature] DATE: 12/23/82
(Authorized Signature) 54 59
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: [Signature] DATE: 12/23/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS _____

On file 70204 12-28-82

003801

BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0615351

Authorization Number 8 _____ 13

US STEEL SUDRY- 1701 E. 122ND ST. 312 646 5900 0316 000086 G
DA. J. A. (Company Name) Address Phone Number 14 Generator Number 24
CHICAGO City ILL. State 60633 Zip IL0000814665 EPA Number

WASTE HAULER(S)

AMERICAN CHEMICAL 420 S. COLFAX Hauler Name Hauler Address
50 STEINO TRUCKING 13642 KENTON Hauler Name Hauler Address
312 785-8440 Phone Number
S.W.H. Registration Number 0301011 25 31
IND0016360265 EPA Number
S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL 420 S. COLFAX 91808902
(Facility Name) Address 39 Site Number 46
GRIFFITH, INDIANA INDIANA 4639 312 76 83400 IN0016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DDT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE LIQUIDS, FLAMMABLE

UN1993 UN or NA Number

F003 EPA HW Number

WEIGHT FOR D.O.T. USE 41,800 LBS (circle one) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 3041.80 47 52

GALLONS (Circle One) 2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One)

(DRUMS 76) Number

TANK TRUCK

OPEN TRUCK

(OTHER Specify)

VAH TRAILER

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 12/16/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature)

DATE: 12/16/82 54 59

(2) (Authorized Signature)

DATE: 54 59

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 12/16/82 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

Om doek 12.16.82 50 TO 204K T-50 GRW
26 TO S/Waste 003802

See reverse side for instructions
Please TYPE or PRINT clearly using a ball point pen — PRESS HARD

State of Minnesota
HAZARDOUS WASTE SHIPPING PAPER

① SHIPMENT NO. 101982

GENERATOR (SHIPPER)	
GENERATOR—SHIPPER NAME ② Universal Coating Company	SITE I.D. NO. ③
PICKUP ADDRESS ④ 2300 East 26th Street	EPA I.D. MN D006481899
CITY, STATE, ZIP CODE ⑤ Mpls, Minn. 55406	PHONE NO. ⑥ (612) 721-6478
BUSINESS ADDRESS ⑦ 2300 East 26th Street Mpls, Minn, 55406	

TRANSPORTER (CARRIER)	
TRANSPORTER NAME ⑮ Worum Chemical Company	MPCA REGISTRATION NO. ⑯ TR 0014
BUSINESS ADDRESS ⑰ 2130 Kasota Avenue	EPA I.D. MND 006213664
CITY, STATE, ZIP CODE ⑱ St. Paul, Minn. 55108	PHONE NO. ⑲ (612) 645-9224
DATE RECEIVED ⑳ 10/19/82	The wastes described above were received by me for shipment to the named Hazardous Waste Facility.
AUTHORIZED SIGNATURE ㉑ x <i>[Signature]</i>	TITLE ㉒ DRIVER
SHIPMENT INTERLINED ㉓	MPCA REGISTRATION NO. EPA I.D.
DATE RECEIVED ㉔	
AUTHORIZED SIGNATURE ㉕ x	

⑧ No	QUANTITY SHIPPED	HAZ. MAT.	KIND OF UNIT—PROPER DOT SHIPPING NAME	DOT HAZ. CLASS	SHIPPING WEIGHT
1	10	X	Drums Waste Flammable Liquid	flammable liquid	4000#
2			NOS - UN 1993 Toluene and		
3			Adhesive.		
4					
5					

⑨ Does Generator Plan authorize commingling? YES NO
(If "YES", attach sheet listing other generators and quantities of waste.)

⑩ No	WASTE CODE	MPCA HAZARDOUS PROPERTY	APPROXIMATE PRODUCTION DATES	
			From	To
1	F O O 3	Flammable Liquid	7-20-82	10-15-82
2				
3				
4				
5				

HAZARDOUS WASTE FACILITY	
FACILITY NAME ⑲ Worum Chemical Company	STATE PERMIT/LICENSE NO. ㉗ 1230017
SITE ADDRESS ㉘ 2130 Kasota Avenue	EPA I.D. MND 006213664
CITY, STATE, ZIP CODE ㉙ St. Paul, Minn. 55108	PHONE NO. ㉚ (612) 645-9224
DATE RECEIVED ㉛ 10/19/82	The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. ㉜ <input type="checkbox"/> For exceptions see attachment.*
AUTHORIZED SIGNATURE ㉝ x <i>[Signature]</i>	TITLE ㉞
DATE WASTE DISPOSED ㉟	I certify that the above named wastes have been processed and/or disposed.
AUTHORIZED SIGNATURE ㊱ x	TITLE ㊲

⑪ SPECIAL INSTRUCTIONS

Disposal

SPECIAL EMERGENCY PROCEDURE ATTACHED

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

The wastes described above were consigned to the Carrier named. The Hazardous Waste Facility can and will accept this shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

DATE SHIPPED ⑫ 10/19/82	AUTHORIZED SIGNATURE ⑬ x <i>[Signature]</i>	TITLE ⑭ G.M.
----------------------------	--	-----------------

⑳ MAIL TO: HAZARDOUS WASTE, MIS
322 WASHINGTON AVE. S.
HOPKINS, MN 55343

In case of a spill in Minnesota, immediately call the MPCA 24-hour emergency number, (612) 296-7373, and the National Response Center, (800) 424-8802

- 1. White—Hazardous Waste Facility Mail to Generator
- 2. Yellow—Generator (Shipper) Mail to ⑰
- 3. Pink—Hazardous Waste Facility Mail to ⑰
- 4. Orange—Hazardous Waste Facility Mail to Generator
- 5. Gold—Hazardous Waste Facility Retain
- 6. Blue—Transporter (Carrier) Retain
- 7. Green—Generator (Shipper) Retain

HAZARDOUS WASTE MANIFEST

0051
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	CDMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED DR RECEIVED
GENERATOR/ SHIPPER		VERMETTE MACHINE CO. INC. 7-143 RD. ST. HAMMOND, IN. 46320 931-5406	3/24/82
TRANSPORTER # 1		STAND TRUCK	
TRANSPORTER # 2 (If required)			
TSDf TREATMENT STORAGE OR DIS- POSAL FACILITY		AMERICAN CHEM 0004002	
TSDf TREATMENT STORAGE OR DIS- POSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
4			FOOL TRICHLOROETHYLENE					220 GAL.		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT
C.O.D. TO:
ADDRESS

COD Amt: \$

C.O.D. FEE:
PREPAID
COLLECT \$

Note—Where the rate is dependent on value shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID Check box if charges are to be collect
COLLECT

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

00107
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER		VEHICLE MTR CO 7-14-82 ST. 151-2406 1111111111 11-40-20	7/14/82
TRANSPORTER # 1	IND 016360	AMERICAN CHEMICAL SERVICE 40 STRAW 4705 COLHEX QUAY IN VREG	7/19/82
TRANSPORTER # 2 (If required)	IND 016360	AMERICAN CHEMICAL SERVICE 4705 COLHEX QUAY IN	7/19/82
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # OF NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WTVOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
5			FCM TRICHLOROETHYLENE					275 GAL		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID except when box at right is checked. Check box if charges are to be collected

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

#6
MANIFEST DOCUMENT NUMBER

08296

SHIPPER NUMBER

Thomas Solvent Company

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
Wabash, inc., 1375 Swan Street Huntington, Indiana 46750	Exempt small generator		
Thomas Solvent Co., 5605 Planeview Dr. Fort Wayne, Indiana 46825 219-482-9638	MID-039993902		
American Chemical Service, 420 So. Colfax Griffith, IN 46319 219-924-4370	INDO-16360265		7/14
ALTERNATE			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carriage Use Only)
3 drums	HM F003	Waste Methylene Chloride/Xylene				Gal.	165 Gal.	NTA	NTA

SPECIAL HANDLING INSTRUCTIONS

N/A

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other OOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

N/A

COD N/A Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

TOTAL CHARGES: \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:

\$ N/A per

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

N/A Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES

FREIGHT PREPAID except when box at right is checked. Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

5

HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

1
MANIFEST DOCUMENT NUMBER

Thomas Solvent Company

NAME OF CARRIER

(SCAC)

SHIPPER NUMBER

CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
Exempt small generator		Wabash, Inc., 1375 Swan Street Huntington, Indiana 46750	
TRANSPORTER # 1	MID-039993902	Thomas Solvent Co., 5605 Planeview Dr. Fort Wayne, Indiana 46825 219-482-9638	
TRANSPORTER # 2 (if required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	INDO-16360265	American Chemical Service, 420 So. Colfax Griffith, IN 46319 219-924-4370	
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
2 drums		F001 F003	Waste Methylene Chloride/Xylene				Gal.	165 Gal.	NTA	NTA

SPECIAL HANDLING INSTRUCTIONS

N/A

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

N/A

COD N/A Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ N/A per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
N/A _____ Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

TOTAL CHARGES: \$
FREIGHT CHARGES
FREIGHT PREPAID FREIGHT COLLECT Check box if charges are to be collected

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

GENERATOR'S SIGNATURE

9/30/82
DATE

TRANSPORTER #1 SIGNATURE & DATE

This is to certify acceptance of the hazardous waste for treatment, storage or disposal

TSDf SIGNATURE

TRANSPORTER #2 SIGNATURE & DATE (if required)

10/21/82
DATE

5

HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

MANIFEST DOCUMENT NUMBER

06470

SHIPPER NUMBER

Thomas Solvent Company

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
Exempt small generator		Wabash, Inc., 1375 Swan Street Huntington, Indiana 46750	
TRANSPORTER # 1	MID-039993902	Thomas Solvent Co., 5606 Planeview Dr. Fort Wayne, IN 46825 219-482-9638	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	INDO-16360265	American Chemical Service, 420 So. Colfax Griffith, IN 46319 219-924-4370	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
3 drums		F001 F003	Waste Methylene Chloride/Xylene				Gal.	165 Gal.	NTA	NTA

SPECIAL HANDLING INSTRUCTIONS

N/A

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

N/A

COD N/A Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

N/A per

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

N/A

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

(Signature of Consignor)

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID Freight when box is checked CHARGE BOX if charges are to be collected

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (Contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

Jerry J Arnold

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

#4

MANIFEST DOCUMENT NUMBER

Thomas Solvent Company

SHIPPER NUMBER

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
Exempt small generator		Wabash, Inc. 1375 Swan street Huntington, IN 46750	
TRANSPORTER # 1	MID-039993902	Thomas Solvent Co., 5005 Pineview Dr. Fort Wayne, IN 46825 219-482-9638	
TRANSPORTER # 2 (if required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	INDO-16360265	American Chemical Service, 420 So. Colfax Griffith, IN 46319 219-924-4370	1/7/82
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
3 drums	F	F001 F003	Waste Methylene Chloride/Xylene	NA-1993			GAL	165 Gal.	NTA	NTA

SPECIAL HANDLING INSTRUCTIONS

N/A

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS N/A

COD A Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ N/A per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carriage of shipper's weight." N/A Signature _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES: \$
FREIGHT PREPAID except when box at right is checked. Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

4
MANIFEST DOCUMENT NUMBER

Thomas Solvent Company

NAME OF CARRIER

(SCAC)

SHIPPER NUMBER

CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
Exempt small generator		Wabash, Inc., 1375 Swan street Huntington, IN 46750	
TRANSPORTER # 1	MID-039993902	Thomas Solvent Co., 5605 Planeview Dr. Fort Wayne, IN 46825 219-482-9638	
TRANSPORTER # 2 (if required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	INDO-16360265	American Chemical Service, 420 So. Colfax Griffith, IN 46319 219-924-4370	1/7/82
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
3 drums	F F001 F003	Waste Methylene Chloride/Xylene	NA-1993			GAL	165 Gal.	NTA	NTA

SPECIAL HANDLING INSTRUCTIONS

N/A

If an RO commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS N/A

COD N/A Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ N/A per

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
N/A Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
(Signature of Consignor)

TOTAL CHARGES: \$
FREIGHT CHARGES
FREIGHT PREPAID Freight prepaid when box is checked
Check box if charges are to be collected

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

GENERATOR'S SIGNATURE: *Jerry L Arnold* DATE: 12/21/81

TRANSPORTER #1 SIGNATURE & DATE: *J. Hunsicker* DATE: 1/7/82
TRANSPORTER #2 SIGNATURE & DATE (if required):
This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

HAZARDOUS WASTE MANIFEST

65150
MANIFEST DOCUMENT NUMBER

MR. FRANK, INC.

0079029
SHIPPER NUMBER

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND005430244	Warsaw Chemical Company, Inc. Argonne Road P. O. Box 858 Warsaw, Indiana 46580 (219) 267-3251	12/16/80
TRANSPORTER # 1	IND069506160	MR. FRANK INC. 201 W. 155 st. So. Holland, Ill. 60473 (312) 596-3377	12/16/80
TRANSPORTER # 2 (if required)	IND016360265	American Cleaning Service, Inc. P. O. Box 190 Griffith, Indiana 46319 (219) 924-4370	12/16/80
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use only)
4500 gal	*	FO05	FLAMMABLE LIQUID N.O.I.	UN 1913				4500 gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID Check box if charges are to be collected

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

\$ _____ per _____

Signature

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION To 202R 12/16/80 JPM T-5c

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0173296

WESCO MANUFACTURING
(Company Name)
AURORA

PO BOX 1266/S. ORCHARD RD
IL 60507

Authorization Number 920250
11LD 005237235
0894690003

City

State

Zip

WASTE HAULER(S)

(1) STRAND TRUCKING
Hauler Name

13642 KENTON
CRESTWOOD, IL 60445

S.W.H. Registration Number 0311004

(2) ECOLOGICAL TRANSFER
Hauler Name

Hauler Address

S.W.H. Registration Number 000646810

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL
(Facility Name)
GRIFFITH

420 S. COLFAX / BOX 190
INDIANA 46319

91808902
Site Number

City

State

Zip

IN 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT & SOLVENT

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION:

HAZARD CLASS:

PAINT THINNER & PIGMENTS

FLAMABLE

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE 3-26-82

T.W. Boyce
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 1750

GALLONS (Circle One)
CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER

(Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Thomas Strand
(Authorized Signature)

DATE 3/26/82

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Michael Berg
(Authorized Signature)

DATE 3-26-82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782 3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424 88

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 ILPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

On dock 3-26-82 GRM
To dump box 5-6-82 T-50

003013

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0556709

Authorization Number 920250

SPECIAL WASTE HAULING MANIFEST

WESO MANUFACTURING 1266 S. ORCHARD RD. 312-897-8458 0894690003
(Company Name) Address Phone Number Generator Number
AURORA ILL 60507 I L D 0 0 5 2 3 7 2 3 5
City State Zip EPA Number

WASTE HAULER(S)

13642 KENTON
STRAND TRUCKING CRESTWOOD, ILL 60445
Hauler Name Hauler Address
312 355 8440 0 3 1 1 0 0 4
Phone Number S.W.H. Registration Number
I L T O 0 0 6 4 6 8 1
EPA Number

ECOLOGICAL TRANSFER
Hauler Name Hauler Address
3 8 5 8 4 4 0
Phone Number
S.W.H. Registration Number 32
EPA Number 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL 420 S. COLFAX BOX 190 9 1 8 0 8 9 0 2
(Facility Name) Address Site Number
GRIFFITH INDIANA 46319 I N O 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT & SOLVENT WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: PAINT THINNER & PIGMENTS FLAMABLE HAZARD CLASS: 4101993
1294 F 6 0 5
UN or NA Number EPA HW Number

WEIGHT FOR O.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 000770 1 GALLONS (Circle One) 2 CU. YDS.
METHOD OF SHIPMENT (Circle One) (DRUMS 14) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Ronald M Strand
(Authorized Signature)

DATE: 9/15/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ronald M Strand
(Authorized Signature)

DATE: 9/15/82

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

M. Michael Perry
(Authorized Signature)

DATE: 9/15/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-267

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 9.15.82
To 204 RT-50 GRM 9.15.82
003814

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS)

Act 136 Waste (OTHER)

MI 0003106

IDENTIFICATION	Generator's Name Westinghouse Electric Corp.	Primary Transporter's Name Valley City Refuse Disposal, Inc.	Treatment, Storage or Disposal Facility American Chemical Service, Inc.
	Site Address 4300 36th Street, S.E. Grand Rapids, MI 49508	Transporters Address 2650 Thornwood, S.W. Wyoming, MI 49509	Facility Address 420 S. Colfax Griffith, IN 46319
	Phone Number (616) 949-1050	Phone Number (616) 538-8499	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D 083 690 537	Transporter's EPA I.D. Number MI D 055 855 373	Facility Site EPA I.D. Number IND 016 360 265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Ház. Class Code	Container				Weight or Volume	Units	Hazardous Waste Number	
					No.	Type	Solid	Liquid				Gas
1.	Waste Methylene Chloride	ORM-A	1593	09	2	Dr		X			gal	F002
2.												
3.												
4.												
5.												
6.												

COMMENTS: Include Safety precautions and special handling instructions.

TRANSPORTER COMPLETES

<p>GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.</p>	Generator Signature <i>Dink Moore</i>	Date Shipped MO. DAY YEAR 10 14 82
	<p>HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.</p>	Transporter Vehicle I.D. No. No. 1 640 Subsequent Transporter Vehicle I.D. No's

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

<p>TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.</p>	TSDF Signature <i>F. Dumper</i>	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 10 15 82
	Facility Site EPA I.D. Number IND 016 360 265		

Describe any significant discrepancies between manifest and shipment.

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS)

Act 136 Waste (OTHER)

MI 0048771

IDENTIFICATION	Generator's Name WESTINGHOUSE ELE CORP.	Primary Transporter's Name Valley City Refuse Disposal	Treatment, Storage or Disposal Facility American Chemical Service
	Site Address 4300 36TH ST. SE GRANDRAPIDS MICHIGAN 49508	Transporter's Address 2640 Thornwood SW. Wyoming, MI 49509	Facility Address 420 S. Colfax Ave. Griffith, IN 46319
	Phone Number (616) 949 1050	Phone Number (616) 538-8499	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D083690537	Transporter's EPA I.D. Number MI D005855373	Facility Site EPA I.D. Number IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form			Weight or Volume	Units	Hazardous Waste Number
						No.	Type	Solid	Liquid	Gas			
	1.	WASTE CEMENT LIQUID NOS AND WASTE XYLENE MIXTURE	FLAMMABLE LIQUID	NA 1133 UN 1307	7		DR	X			11000 GAL	F1003	
	2.	WASTE CEMENT LIQUID NOS	FLAMMABLE LIQUID	NA 1133	7		DR	X			150 GAL	F1003	
	3.												
	4.												
	5.												
	6.												

COMMENTS: Include Safety precautions and special handling instructions.
EMERGENCY RESPONSE GUIDE NO. 26

TRANSPORTER COMPLETES	GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature <i>Richard S. Mark</i>	Date Shipped MO. DAY YEAR 03 08 82
	HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Signature <i>Chris [Signature]</i>	Date(s) Received 03 08 82

TRANSPORTER COMPLETES	Subsequent Transporter Vehicle I.D. No's	Subsequent transporter(s) signature(s)

If the shipment cannot be delivered, describe the reasons for non-delivery:

TSDF COMPLETES	TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature <i>[Signature]</i>	17 <input checked="" type="checkbox"/> Accepted	Date Received 3 15 82
	Describe any significant discrepancies between manifest and shipment: 17 DRUMS ACCEPTABLE - 15 REJECTED @ SITE	Facility Site EPA I.D. Number IND016360265	15 <input checked="" type="checkbox"/> Rejected	

019600

WASTE DISPOSAL MANIFEST

 Act 64 Waste (HAZARDOUS)

 Act 136 Waste (OTHER)

MI 0048070

IDENTIFICATION	Generator's Name WESTINGHOUSE ELE CORP.	Primary Transporter's Name VALLEY CITY REFUSE DISPOSAL	Treatment, Storage or Disposal Facility AMERICAN
	Site Address 4300 36TH ST SE. GRAND RAPIDS MICH. 49508	Transporter's Address 2640 THORNWOOD SW. WYOMING MI.	Facility Address 420 SO. COLFAX AVE. GRIFFITH IN. 46319
	Phone Number (616) 949 1050	Phone Number (616) 538 8499	Phone Number (219) 924 -4370
	Generator's Site EPA I.D. Number MI D 0183690537	Transporter's EPA I.D. Number MI D 005855373	Facility Site EPA I.D. Number IND 016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Weight or Volume	Units	Hazardous Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	WASTE CEMENT LIQUID NOS. AND WASTE XYLENE MIXTURE	FLAMMABLE LIQUID	NA1133 UN1307	07	18 DR	X					800	GAL	F003
2.													
3.													
4.													
5.													
6.													

COMMENTS: Include Safety precautions and special handling instructions.
EMERGENCY RESPONSE NO 26

TRANSPORTER COMPLETES

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature ① <i>Richard J. Mait...</i>	Date Shipped MO. DAY YEAR 03/15/82
HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 H 213-1 Subsequent Transporter Vehicle I.D. No's	Transporter Signature ② <i>Charles...</i> Subsequent transporter(s) signature(s) ③

If the shipment cannot be delivered, describe the reasons for non-delivery

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature ④ <i>J. Dunlop</i>	Date Received MO. DAY YEAR 3/16/82
significant discrepancies between manifest and shipment.	Facility Site EPA I.D. Number IND 016360265	Accepted <input checked="" type="checkbox"/> Rejected <input type="checkbox"/>

BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800-294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800-424-8802

TSDF COPY To 204 FT-5050 GRM 3/16/82

00351

HAZARDOUS WASTE MANIFEST

00100

MANIFEST DOCUMENT NUMBER

MR FRANK INC

NAME OF CARRIER

(SCAC)

SHIPPER NUMBER

CARRIER NUMBER

IDENTIFICATION

GENERATOR/SHIPPER	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
	IND 006390785	WILLIAM TELL WOODCRAFTERS INC P.O. BOX 8 TELL CITY, IND 47586	10-18-82
TRANSPORTER # 1	ILD 069506160	MR FRANK INC 201 W 155th SOUTH HOLLAND, IL	
TRANSPORTER # 2 (if required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICE INC COLFAX AVE GRIFFITH INDIANA 46319	10/19/82
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or YPOX	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1 tank truck		F-005	Flammable liquids N.O.S.	1993			gals	3,000		

SPECIAL HANDLING INSTRUCTIONS

If an RO commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

TOTAL CHARGES: \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:
\$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
Signature _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
(Signature of Consignor) _____

FREIGHT CHARGES
FREIGHT PREPAID Check box if charges are to be collected when box is checked are to be collected

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

00100

MANIFEST DOCUMENT NUMBER

MR FRANK INC
NAME OF CARRIER

(SCAC)

SHIPPER NUMBER

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND 006390785	WILLIAM TELL WOODCRAFTERS INC P.O. BOX 8 TELL CITY, IND 47586	10-18-82
TRANSPORTER # 1	ILD 069506160	MR FRANK INC 201 W 155th SOUTH HOLLAND, IL	
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICE INC COLFAX AVE GRIFFITH INDIANA 46319	10/19/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or XXXX	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WTVOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1 tank truck	HA		F-005 Flammable liquids N.O.S.	1993			gals	3,000		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

TOTAL CHARGES: \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

FREIGHT CHARGES

FREIGHT PREPAID except when box is checked
Check box if charges are to be collected

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

To Be Prepared 0482447

Authorization Number 991654

Zipatone Inc. 150 Fencil Lane 449-55001
Hillsdale Illinois 60162
Generator Number 11581
EPA Number 23000

WASTE HAULER(S)

Langrebe State Road Valparaiso, Indiana 842-3121
Hauler Name Hauler Address Hauler Address
EPA Number 134581
S.W.H. Registration Number 009842824
EPA Number 009842824

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 S. COLEMAN AVE.
Coryville Indiana 46312 768-3400
Site Number 91808902
EPA Number 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Scrap Solvent WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Drums - Scrap Solvent Flammable UN 1993
FOOS EPA HW Number

WEIGHT FOR D.O.T. USE 1699 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 4 DRUMS 1 GALLONS (Circle One) 200

METHOD OF SHIPMENT (Circle One) (DRUMS 4) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE: 1/19/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature) DATE: 1/19/82
(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Frank James Price (Authorized Signature) DATE: 1/20/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 1/20/82 6PM
TO 112R T-63 6120M 1/20/82

003621

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

To Be Prepaid
0588216

Authorization Number 99-1454

Zipstone Inc 150 Fenwick Lane 419-5500 0311231003
(Company Name) Address Phone Number Generator Number
Hillside Illinois 60162
City State Zip EPA Number

Landgrebe State Road 812-3121
Hauler Name Hauler Address Phone Number
Valparaiso Indiana 46383
Hauler Name Hauler Address Phone Number
S.W.H. Registration Number 25 EPA Number
S.W.H. Registration Number 009842824 EPA Number

American Chemical Service 420 S. Colfax Ave. 918 089 02
(Facility Name) Address Site Number
Griffiths Indiana 46312 7682 3490 IND. 016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR
WASTE NAME: Scrap Solvent WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: Drums Scrap Solvent Flammable HAZARD CLASS: UN 1993
WEIGHT FOR D.O.T. USE: 1,790 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 4 DRUMS
METHOD OF SHIPMENT (Circle One) (DRUMS 4) TANK TRUCK OPEN TRUCK OTHER (Specify) _____
GALLONS (Circle One) 2 CU. YDS. 53

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
[Signature] DATE: 3/8/82
(Authorized Signature)

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED
(1) [Signature] DATE: 3/9/82
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*
HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.
[Signature] DATE: 3/10/82
(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3 SITE COPY - PART 3
On dock 3/10/82 6PM
To 112R T-63 6PM 3/16/82
003622

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

To Be Prepaid
0586217
Authorization Number *80501/2/3*

Zipatone Inc. 150 Fencil Lane 419-5500 031123003
(Company Name) Address Phone Number Generator Number
Hillside Illinois 60162
City State Zip EPA Number

WASTE HAULER(S)

Landgrebe State Road 847-3121 S.W.H. Registration Number 25
Hauler Name Hauler Address Phone Number EPA Number
Valpariso Indiana 46383 S.W.H. Registration Number 165
Joe Ind. 009843824
Hauler Name Hauler Address Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 S Colefax Ave. 91808202
(Facility Name) Address Site Number
GRIFFITHS Indiana 46312 768-3400 Ind. 016346206
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Scrap Solvent WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: Drums Scrap Solvent Flammable HAZARD CLASS: UN1993
UN or NA Number EPA HW Number F005
WEIGHT FOR D.O.T. USE 1715 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 4 Drums
1 GALLONS (Circle One) 2 CU. YDS. 215
METHOD OF SHIPMENT (Circle One) (DRUMS 4) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDIION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINDIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Thomas D. DATE: 5/16/82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) LMT-Dunlop DATE 5/19/82
(Authorized Signature) (54) (59)
(2) _____ DATE _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

Frank James Price DATE 5/20/82
(Authorized Signature) (60) (65)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINDIS: BDO / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 5:20:82 6PM
To 112 RT-63 6PM 5:27:82

003623

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

To Be Prepaid
0586218

Authorization Number 991654
6 13

Zipatone Inc. 150 Ferial Lane 449-5500 0311230003
(Company Name) Address Phone Number 14 1 Generator Number 24
Hillside Illinois 60162
City State Zip EPA Number

WASTE HAULER(S)

Handgrebe State Road 130
Hauler Name Hauler Address S.W.H. Registration Number 25
Valpariso, Indiana 842-3121
46383 Phone Number
Hauler Name Hauler Address Phone Number EPA Number
Icc. Ind. 009842824
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service 420 S. Colfax Ave. 918 089025
(Facility Name) Address 39 Site Number 46
Griffiths Indiana 46312 768-3400 Ind. 016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Scrap Solvent WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Drums Scrap Solvent Flammable HAZARD CLASS: UN 1993
EPA HW Number F005
WEIGHT FOR O.D.T. USE 1,279 LBS (circle one) TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YOS. OR GAL. QUANTITY OF WASTE DELIVERED: 3 Drums 1 GALLONS (Circle One) 2 CU. YOS. 165
METHOD OF SHIPMENT (Circle One) (DRUMS 3) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
Jerraine D. (Authorized Signature) DATE: 6/24/82

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) LMT-Dushy (Authorized Signature) DATE: 6/25/82
(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
Frank James Price (Authorized Signature) DATE: 6/28/82

COMMENTS OR SPECIAL INSTRUCTIONS:

To 112K T-6

003624

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

TO BE PREPAID

0586220

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number 991654 13

ZIPATONE INC. 150 FENCL LANE 449-5500 0311230003 G
(Company Name) Address Phone Number Generator Number
HILLSIDE ILLINOIS 60162
City State Zip EPA Number

WASTE HAULER(S)

LANDGREBE STATE ROAD 130, VALPARISO, INDIANA 46383 S.W.H. Registration Number 25
Hauler Name Hauler Address
842-3121 ICC.IND.009842824
Phone Number EPA Number
Hauler Name Hauler Address S.W.H. Registration Number 32 IND000984
Phone Number EPA Number IND0009842824

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 S. Colfax Ave. 91808902
(Facility Name) Address Site Number
GRIFFITHS INDIANA 46312 768-3400 IND.016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: SCRAP SOLVENT WASTE PHASE: LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: HAZARD CLASS:

DRUMS SCRAP SOLVENT FLAMMABLE UN1993 F005
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE 1,820 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 4 DRUMS 1 GALLONS (Circle One) 2 CU. YDS. 220
METHOD OF SHIPMENT (Circle One) (DRUMS 4) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Lorami D. DATE: 9/10/82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature] DATE: 9/10/82
(Authorized Signature) (44) (59)
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: [Signature] DATE: 9/13/82
(Authorized Signature) (60) (65)

COMMENTS OR SPECIAL INSTRUCTIONS:

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

TO BE PREPAID
0586222
20996
Authorization Number 8 13

ZIPATONE INC. (Company Name) 150 FENCL LANE Address 449 - 5500 Phone Number 0311230003 Generator Number 6 24
HILLSIDE City ILLINOIS State 60162 Zip EPA Number

WASTE HAULER(S)

LANDGREBE Hauler Name STATE ROAD 130, VALPARISO, IND. 46383 Hauler Address S.W.H. Registration Number 587 25 31
842-3121 Phone Number EPA Number
Hauler Name Hauler Address S.W.H. Registration Number 71696 32 ICC 2980 38
IND 009842824 EPA Number
Phone Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) 420 S. Colfax Ave. Address 609 Site Number 46
GRIFFITHS City INDIANA State 46312 Zip 758-3400 Phone Number IND. 016360265 EPA Number
Alternate (Facility Name) Address Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: SCRAP SOLVENT WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

DRUMS SCRAP SOLVENT FLAMMABLE UN 1993 5005
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE 1,311 LBS TONS (circle one) XXXX WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 165 3 DRUMS 52
1 GALLONS (Circle One) XXXXX 165
2 CU. YDS. 165
METHOD OF SHIPMENT (Circle One) (DRUMS 3) TANK TRUCK OPEN TRUCK OTHER (Specify) 11
Number

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 11/22/92

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)

DATE: 11/24/92
54 59

(2) _____
(Authorized Signature)

DATE: 11/25/92

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Travis Price
(Authorized Signature)

DATE: 11/30/92
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

On dock 11.29.92

To 204 RT-50
0230287.382

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0389877

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991624

Mert & Dougherty, Inc.

1300 North Street

ILD 047036009

(Company Name)

Address

Coal City

IL.

60416

0630200001

City

State

Zip

Generator Number

Telephone #(815) 634-2302

Mr. Frank, Inc.

201 W. 155th Street

S.W.H. Registration Number 0079021

Hauler Name

Hauler Address

312-596-5377

ILD 069506160

South Holland, IL 60473

S.W.H. Registration Number

Hauler Name

Hauler Address

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

91808900

American Chemical

420 S. Colfax

IND 016365265

(Facility Name)

Address

Griffith

IN.

46319

312-768-3400

City

State

Zip

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Organic Solvents

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Flammables

N.O.S. Waste

WEIGHT FOR D.D.T. USE

LBS TONS (circle one)

Solvents IIN 1993

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 4600

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-7-82

D.W. Gaudt
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) C. Borucki
(Authorized Signature)

DATE: 05/07/82

(2)
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature)

DATE: 5-7-82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

To 120K T-50 6PM 5-7-82

SITE COPY - PART 3

003027

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS)

Act 136 Waste (OTHER)

MI 0109792

IDENTIFICATION	Generator's Name DIESEL EQUIPMENT DIV. GMC	Primary Transporter's Name ROZEMA INDUSTRIAL WASTE, INC.	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICES
	Site Address 2100 BURLINGAME GRAND RAPIDS, MI. 49501	Transporter's Address 3164 HUDSON ST. HUDSONVILLE, MI. 49426	Facility Address 420 S. COLFAX AVE. GRIFFITH, INDIANNA 46319
	Phone Number (616) 247-5201	Phone Number (616) 453-3600	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D 0 1 7 0 7 9 6 2 5	Transporter's EPA I.D. Number MI T 0 0 0 6 4 7 0 3 2	Facility Site EPA I.D. Number IN D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Weight or Volume	Units	Hazardous Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	WASTE COMBUSTABLE LIQUID NOS	COMBUSTABLE LIQUID	NA 1993	0, 1	1	X					21340.	LBS	F 0 0 1
2.													
3.													
4.													
5.													
6.													

Include Safety precautions and special handling instructions.
CONTAINS FREON, RQ TRICHLOROETHYLENE ORM-A, UN1710 AND PETROLEUM DISTILLATE UN 1218. DO NOT SMOKE NEAR OR BREATHE VAPORS. TO THE BEST OF THE GENERATOR'S KNOWLEDGE THIS WASTE CONTAINS NO PCB'S.

TRANSPORTER COMPLETES	GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature <i>RW Dickens</i>	Date Shipped MO. DAY YEAR 09 28 81	
	HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 Subsequent Transporter Vehicle I.D. No's 21813	Transporter Signature <i>Butt R</i>	Date(s) Received 9 28 81
	If the shipment cannot be delivered, describe the reasons for non-delivery.			

TSDF COMPLETES	TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature <i>J. Mabee</i> Facility Site EPA I.D. Number IND 0 1 6 3 6 0 2 6 5	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 9 28 81
	Describe any significant discrepancies between manifest and shipment.		To 206R T-50 9/28/81 JPM	

039620

WASTE DISPOSAL MANIFEST

 Act 64 Waste (HAZARDOUS)

 Act 136 Waste

 Other

MI0115682

IDENTIFICATION	Generator's Name DIESEL EQUIPMENT DIV. GMC	Primary Transporter's Name ROZEMA INDUSTRIAL WASTE, INC.	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICES
	Site Address 2100 BURLINGAME GRAND RAPIDS, MI. 49501	Transporter's Address 3164 HUDSON ST. HUDSONVILLE, MI. 49426	Facility Address 420 S. COLFAX AVE. GRIFFITH, IND. 46319
	Phone Number (616) 247-5201	Phone Number (616) 453-3600	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D 0 1 7 0 7 9 6 2 5	Transporter's EPA I.D. Number MI T 0 0 0 6 4 7 0 3 2	Facility Site EPA I.D. Number IND 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES WASTE INFORMATION

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name)	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	WASTE COMBUSTABLE LIQUID NOS	COMBUSTABLE LIQUID	NA 1993	0 1	1	CT		X			12071610	LBS	F 0 0 1
2.											2000 gal		
3.													
4.													
5.													
6.													

Include Safety precautions and special handling instructions:
CONTAINS FREON, RQ TRICHLOROETHYLENE ORM-A, UN1710 AND PETROLEUM DISTILLATE UN 1218. DO NOT SMOKE NEAR OR BREATHE VAPORS. TO THE BEST OF THE GENERATOR'S KNOWLEDGE THIS WASTE CONTAINS NO PCB'S.

TRANSPORTER COMPLETES

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature ① <i>R.P. Blouin</i>	Date Shipped MO. DAY YEAR 030382
HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 218 Subsequent Transporter Vehicle I.D. No's	Transporter Signature ② <i>Butch</i> Subsequent transporter(s) signature(s)
If the shipment cannot be delivered, describe the reasons for non-delivery:		

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature ④ <i>[Signature]</i> Facility Site EPA I.D. Number IN D 0 1 6 3 6 0 2 6 5	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 3382
Describe any significant discrepancies between manifest and shipment:	Was a Surcharge Assessed? <input type="checkbox"/> Yes <input type="checkbox"/> No		

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

To 202 R.T. 50 GRM TSDF COPY 3/3/82

WASTE DISPOSAL MANIFEST

 Act 64 Waste (HAZARDOUS)

 Act 136 Waste

 Other

MI 0115683

Generator's Name DIESEL EQUIPMENT DIV. - GMC	Primary Transporter's Name ROZEMA INDUSTRIAL WASTE, INC.	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICES
Site Address 2100 BURLINGAME GRAND RAPIDS, MI. 49501	Transporter's Address 3164 HUDSON ST. HUDSONVILLE, MI. 49426	Facility Address 420 S. COLFAX AVE. GRIFFITH, IND. 46319
Phone Number (616) 247-5201	Phone Number (616) 453-3600	Phone Number (219) 924-4370
Generator's Site EPA I.D. Number MI D 017079625	Transporter's EPA I.D. Number MI T 000647032	Facility Site EPA I.D. Number IND 016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name)	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	WASTE COMBUSTABLE LIQUID NOS	COMBUSTABLE LIQUID	NA 1993	01	1	CT		X			1717.610 LBS 2725 GALS		F001
2.													
3.													
4.													
5.													
6.													

Include Safety precautions and special handling instructions:
CONTAINS FREON, RQ TRICHLOROETHYLENE ORM-A, UN1710 AND PETROLEUM DISTILLATE UN 1218. DO NOT SMOKE NEAR OR BREATHE VAPORS. TO THE BEST OF THE GENERATOR'S KNOWLEDGE THIS WASTE CONTAINS NO PCB'S.

TRANSPORTER COMPLETES

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature <i>RW Dikens</i>	Date Shipped MO. DAY YEAR 01 28 82
HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 2183 Subsequent Transporter Vehicle I.D. No. _____	Transporter Signature <i>Butch R</i> Subsequent transporter(s) signature(s) _____
If the shipment cannot be delivered, describe the reasons for non-delivery: _____		

FACILITY COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature <i>[Signature]</i> Facility Site EPA I.D. Number IND 016360265	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 1/28/82
Describe any significant discrepancies between manifest and shipment: _____		Was a Surcharge Assessed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

To: 211 KITT-SO BIRM 1/28/82

TSDF COPY

003630

WASTE DISPOSAL MANIFEST

 Act 64 Waste (HAZARDOUS)

 Act 136 Waste

 Other

MI 0115633

IDENTIFICATION	Generator's Name <i>Diesel Equipment Div. GMC</i>	Primary Transporter's Name <i>Rogema Industrial Waste Inc</i>	Treatment, Storage or Disposal Facility <i>American Chemical Services</i>
	Site Address <i>2100 Burlingame Grand Rapids MI 49501</i>	Transporter's Address <i>3164 Hudson St Hudsonville, MI 49426</i>	Facility Address <i>420 South Colfax Ave Griffith, Indiana 46319</i>
	Phone Number <i>(616) 247-5201</i>	Phone Number <i>(616) 453-3600</i>	Phone Number <i>(219) 924-4370</i>
	Generator's Site EPA I.D. Number <i>MI DQ 17079635</i>	Transporter's EPA I.D. Number <i>MI T000647032</i>	Facility Site EPA I.D. Number <i>INDA16360265</i>

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name)	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form			Total Weight or Volume	Units	Hazardous or Liquid Waste Number	
					No.	Type	Solid	Liquid	Gas				Sludge
1.	<i>Waste Combustible Liq. AOS</i>	<i>Combustible Liquid</i>	<i>NA1993</i>	<i>011</i>	<i>1</i>	<i>CT</i>		<i>X</i>			<i>1174.019</i>	<i>Lbs</i>	<i>F001</i>
2.													
3.													
4.													
5.													
6.													

Include Safety precautions and special handling instructions:
*Contains Freon, RQ Trichloroethylene ORM-A, Un 1710 and Petroleum Distillate UN1218
 Do not smoke near or breathe vapors. To the best of the generator knowledge this waste contains no PCBs.*

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: *RW Dickens* Date Shipped: *12.04.81*

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. *No. 1 2183* Transporter Signature: *Bud R* Date(s) Received: *12.04.81*

Subsequent Transporter Vehicle I.D. No's: _____ Subsequent transporter(s) signature(s): _____

If the shipment cannot be delivered, describe the reasons for non-delivery:

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: *[Signature]* Accepted/Rejected: *Y* Date Received: *12.4.81*

Facility Site EPA I.D. Number: *INDA16360265*

Describe any significant discrepancies between manifest and shipment: _____ Was a Surcharge Assessed? Yes No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-424-8802 24 HOURS PER DAY. OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

*TO 202 R T-50 6PM 12/4/81
 TSDF COPY*

00305

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS)

Act 136 Waste (OTHER)

MI 0109762

IDENTIFICATION	Generator's Name DIESEL EQUIPMENT DIV. GMC	Primary Transporter's Name ROZEMA INDUSTRIAL WASTE, INC.	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICES
	Site Address 2100 BURLINGAME GRAND RAPIDS, MI. 49501	Transporter's Address 8164 HUDSON ST. HUDSONVILLE, MI. 49426	Facility Address 420 S. COLFAX AVE. JEFFTOWN, INDIANNA 46319
	Phone Number (616) 247-5201	Phone Number (616) 453-3600	Facility Phone Number 219 924-4370
	Generator's Site EPA I.D. Number MI 0917079625	Transporter's EPA I.D. Number MI 09109647032	Facility Site EPA I.D. Number IND 016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

IND 016360265

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Hazard Class Code	Container			Form			Weight or Volume	Units	Hazardous Waste Number
					No.	Type	Spills	Liquid	Gas	Sludge			
1.	WASTE COMBUSTABLE LIQUID NOS	COMBUSTABLE LIQUID	NA1993	01	1	CT	X				16840	LBS	F001
2.													
3.													
4.													
5.													
6.													

COMMENTS
Include Safety precautions and special handling instructions.
CONTAINS FREON, RQ TRICHOETHYLENE ORMA, UN1710 AND PETROLEUM DISTILLATE UN 1218. DO NOT SMOKE NEAR OR BREATHE VAPORS. TO THE BEST OF THE GENERATOR'S KNOWLEDGE THIS WASTE CONTAINS NO PCB'S.

TRANSPORTER COMPLETES

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

If the shipment cannot be delivered, describe the reasons for non-delivery.

Generator Signature <i>[Signature]</i>	Date Shipped MO. DAY YEAR 11/03/81
Transporter Signature <i>[Signature]</i>	Date(s) Receive 11/3/81
Subsequent transporter(s) signature(s)	

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

Describe any significant discrepancies between manifest and shipment.

TSDF Signature <i>[Signature]</i>	Date Received 11/3/81
Site EPA I.D. Number IND 016360265	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected

003032

WASTE DISPOSAL MANIFEST

Act 64 Waste (HAZARDOUS) Act 136 Waste Other

MI 0115673

IDENTIFICATION	Generator's Name DIESEL EQUIPMENT DIV. GMC	Primary Transporter's Name ROZEMA INDUSTRIAL WASTE, INC.	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICES
	Site Address 2100 BURLINGAME GRAND RAPIDS, MI. 49501	Transporter's Address 3164 HUDSON ST. HUDSONVILLE, MI. 49426	Facility Address 420 S. COLFAX AVE. GRIFFITH, IND. 46319
	Phone Number (616) 247-5201	Phone Number (616) 453-3600	Phone Number (219) 924-4370
	EPA ID Number MI 00017079025	Transporter's EPA ID Number MI 0000647032	Facility Site EPA ID Number IND 016360265

If more than one Transporter is to be utilized, give the Name and EPA ID Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name)	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container					Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas			
1.	WASTE COMBUSTABLE LIQUID NOS	COMBUSTABLE LIQUID	NA 1993	01	1	CT		X		1166 LB	LBS	F 001
2.										11800		
3.												
4.												
5.												
6.												

Include Safety precautions and special handling instructions:
CONTAINS FREON, RQ TRICHLOROETHYLENE ORM-A, UN1710 AND PETROLEUM DISTILLATE UN 12188 DO NOT SMOKE NEAR OR BREATHE VAPORS, TO THE BEST OF THE GENERATOR'S KNOWLEDGE THIS WASTE CONTAINS NO PCB'S.

TRANSPORTER COMPLETES

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual, I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and 1989 PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature <i>[Signature]</i>	Date Shipped MO. DAY YEAR 05/12/82
HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 Subsequent Transporter Vehicle I.D. No's	Transporter Signature <i>[Signature]</i> Date(s) Received 05/12/82
If the shipment cannot be delivered, describe the reasons for non-delivery:		

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature <i>[Signature]</i> Facility Site EPA ID Number IND 016360265	Accepted <input checked="" type="checkbox"/> Rejected <input type="checkbox"/>	Date Received 5/12/82
Describe any significant discrepancies between manifest and shipment:		Was a Surcharge Assessed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TSDF COPY To 210 RT-50 GRM 5/12/82

003633

WASTE DISPOSAL MANIFEST

 Act 64 Waste (HAZARDOUS)

 Act 136 Waste

 Other

MI 0115681

Generator's Name DIESEL EQUIPMENT DIV. GMC	Primary Transporter's Name ROZENA INDUSTRIAL WASTE, INC.	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICES
Site Address 2100 BURLINGAME GRAND RAPIDS, MI. 49501	Transporter's Address 3164 HUDSON ST. HUDSONVILLE, MI. 49426	Facility Address 420 S. COLFAX AVE. GRIFFITH, IND. 46319
Phone Number (616) 247-5201	Phone Number (616) 453-3600	Phone Number (219) 924-4370
Generator's Site EPA I.D. Number MI D 0 1 7 0 7 9 6 2 5	Transporter's EPA I.D. Number MI T 0 0 0 6 4 7 0 3 2	Facility Site EPA I.D. Number IND 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number	
					No.	Type	Solid	Liquid	Gas	Sludge				
1.	WASTE COMBUSTABLE LIQUID NOS	COMBUSTABLE LIQUID	NA 1993	0 1	1	CT			X			219000	LBS	F 0 0 1
2.												111900		
3.														
4.														
5.														
6.														

Include Safety precautions and special handling instructions.

CONTAINS FREON, RQ TRICHLOROETHYLENE ORM-A, UN1710 AND PETROLEUM DISTILLATE UN 1218. DO NOT SMOKE NEAR OR BREATHE VAPORS. TO THE BEST OF THE GENERATOR'S KNOWLEDGE THIS WASTE CONTAINS NO PCB'S.

TRANSPORTER COMPLETES

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA 64 and/or 1969 PA 136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature <i>RW Dickens</i>	Date Shipped MO. DAY YEAR 01 08 82	
	HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Signature <i>Butch Proxmire</i>	Date(s) Received 04 29 82
	Transporter Vehicle I.D. No. No. 1 Subsequent Transporter Vehicle I.D. No's	Subsequent transporter(s) signature(s)	

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDP CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDP Signature <i>[Signature]</i>	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Rec'd 4 8
	Facility Site EPA I.D. Number IND 0 1 6 3 6 0 2 6 5		Was a Surcharge Assessed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM (MPEAS) AT 800-424-8802 24 HOURS PER DAY.

MICHIGAN ACT 136 - 292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802

TO THE T-50 GRM 4-8-82

003534

WASTE DISPOSAL MANIFEST

 Act 64 Waste (HAZARDOUS)

 Act 136 Waste

 Other

MI0115674

Generator's Name DIESEL EQUIPMENT DIV. GMC	Primary Transporter's Name ROZEMA INDUSTRIAL WASTE, INC.	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICES
Site Address 2100 BURLINGAME GRAND RAPIDS, MI. 49501	Transporter's Address 3164 HUDSON ST. HUDSONVILLE, MI. 49426	Facility Address 420 S. COLFAX AVE. GRIFFITH, IND. 46319
Phone Number (616) 247-5201	Phone Number (616) 453-3600	Phone Number (219) 924-4370
Generator's Site EPA I.D. Number MI D 0 1 7 0 7 9 6 2 5	Transporter's EPA I.D. Number MI 1 0 0 0 6 4 7 0 3 2	Facility Site EPA I.D. Number I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name)	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	WASTE COMBUSTABLE LIQUID NOS	COMBUSTABLE LIQUID	NA 1993	0 1	1	CT		X			12102810	LBS	F 0 0 1
2.													
3.													
4.													
5.													
6.													

Include Safety precautions and special handling instructions.
CONTAINS FREON, RQ TRICHLOROETHYLENE ORM-A, UN1710 AND PETROLEUM DISTILLATE UN 1218. DO NOT SMOKE NEAR OR BREATHE VAPORS. TO THE BEST OF THE GENERATOR'S KNOWLEDGE THIS WASTE CONTAINS NO PCB'S.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: *EP Blouw* (1)
 Date Shipped: **MO. DAY YEAR** **06/16/82**

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No.: **No. 1**
 Subsequent Transporter Vehicle I.D. No's: _____

Transporter Signature: *Butch Rozema* (2)
 Subsequent transporter(s) signature(s): _____ (3)
 Date(s) Received: **06/16/82**

If the shipment cannot be delivered, describe the reasons for non-delivery:

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

Facility Signature: *James*
 Facility Site EPA I.D. Number: **IND 0 1 6 3 6 0 2 6 5**
 Accepted
 Rejected
 Date Received: **6/16/82**

Describe any significant discrepancies between manifest and shipment:

Was a Surcharge Assessed? Yes No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-8802 24 HOURS PER DAY.

TSDF COPY **To 210 K T-50 6/16/82 6/16/82**

003535

WASTE DISPOSAL MANIFEST

 Act 64 Waste (HAZARDOUS)

 Act 136 Waste

 Other

MI 0140901

Generator's Name *ROCHESTER PRODUCTS DIV. GMC	Primary Transporter's Name VALLEY CITY REFUSE DISPOSAL INC.	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICES
Site Address 2100 BURLINGAME GRAND RAPIDS, MICHIGAN 49501	Transporter's Address 2640 THORNWOOD ST. S.W. WYOMING, MI. 49509	Facility Address 420 COLFAX AVE. GRIFFITH, IND. 46319
Phone Number (616) 247-5201	Phone Number 616-538-8499	Phone Number 219 924-4370
Generator's Site EPA I.D. Number MI D 0 1 7 0 7 9 6 2 5	Transporter's EPA I.D. Number MI D 0 5 5 8 5 5 3 7 3	Facility Site EPA I.D. Number IND 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name)	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container			Form			Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Other			
1.	WASTE COMBUSTABLE LIQUID NOS	COMBUSTABLE LIQUID	NA 1993	0 1	1	CT	X				116320	LBS	F 0 0 1
2.											116100		
3.													
4.													
5.													
6.													

COMMENTS Include Safety precautions and special handling instructions.
 CONTAINS FREON, RQ TRICHLOROETHYLENE ORM-A, UN1710 AND PETROLEUM DISTILLATE UN 1218. DO NOT SMOKE NEAR OR BREATHE VAPORS. TO THE BEST OF THE GENERATOR'S KNOWLEDGE THIS WASTE CONTAINS NO PCB'S.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: *PP Blawie* Date Shipped: **012982**

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No.: **No. 1 637**
 Subsequent Transporter Vehicle I.D. No's: _____

Transporter Signature: *Burt R* Date(s) Received: **92982**
 Subsequent transporter(s) signature(s): _____

If the shipment cannot be delivered, describe the reasons for non-delivery:

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Site ID Number: *740000* Accepted Rejected
 Facility Site EPA I.D. Number: _____ Date Received: **92982**

Describe any significant discrepancies between manifest and shipment:

Was a Surcharge Assessed? Yes No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TSDF COPY **To 210KT-50 GPM 9.29.82**

003636

WASTE DISPOSAL MANIFEST

 Act 64 Waste (HAZARDOUS)

 Act 136 Waste

 Other

MI 0115676

IDENTIFICATION	Generator's Name DIESEL EQUIPMENT DIV. GMC	Primary Transporter's Name COZEMA INDUSTRIAL WASTE, INC.	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICES
	Site Address 2100 BURLINGAME GRAND RAPIDS, MI. 49501	Transporter's Address 5164 HUDSON ST. PESONVILLE, MI 49426	Facility Address 420 S. COLFAX AVE. GRIFFITH, IND. 46319
	Phone Number (616) 247-5201	Phone Number (616) 453-3600	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D 017073625	Transporter's EPA I.D. Number MI T 000647032	Facility Site EPA I.D. Number IND 016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

WASTE INFORMATION	LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name)	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
						No.	Type	Solid	Liquid	Gas	Storage			
1.		WASTE COMBUSTABLE LIQUID NOS	COMBUSTABLE LIQUID	NA 1993	0 1	1	CT		X			129810	LBS	F 0 0 1
2.												111900		
3.														
4.														
5.														
6.														

Include Safety precautions and special handling instructions:
CONTAINS FREON, RQ TRICHLOROETHYLENE ORM-A, UN1710 AND PETROLEUM DISTILLATE UN 1218. DO NOT SMOKE NEAR OR BREATHE VAPORS. TO THE BEST OF THE GENERATOR'S KNOWLEDGE THIS WASTE CONTAINS NO PCB'S.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA84 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature: *CP Blouws* (1)
 Date Shipped: **MO. DAY YEAR** 08 25 82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1** 637
 Subsequent Transporter Vehicle I.D. No's: _____
 Transporter Signature: *Butch Rogers* (2)
 Subsequent transporter(s) signature(s): _____
 Date(s) Received: **8/25/82**

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature: *J. Dunlop* (4)
 Facility Site EPA I.D. Number: **IND 016360265**
 Was a Surcharge Assessed? Yes No
 Date Received: **82582**

Describe any significant discrepancies between manifest and shipment: _____

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

To 210 T-SO GEM 8-25-82 TSDF COPY

WASTE DISPOSAL MANIFEST

 Act 64 Waste (HAZARDOUS)

 Act 136 Waste

 Other

MI 0115675

IDENTIFICATION	Generator's Name DIESEL EQUIPMENT DIV. GMC	Primary Transporter's Name ROZEMA INDUSTRIAL WASTE, INC.	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICES
	Site Address 2100 BURLINGAME GRAND RAPIDS, MI. 49501	Transporter's Address 3164 HUDSON ST. HUDSONVILLE, MI. 49426	Facility Address 420 S. COLFAX AVE. GRIFFITH, IND. 46319
	Phone Number (616) 247-5201	Phone Number (616) 453-3600	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI 01 017079625	Transporter's EPA I.D. Number MI 01 00647032	Facility Site EPA I.D. Number IND 016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form			Total Weight or Volume	Units	Hazardous or Liquid Waste Number	
					No.	Type	Solid	Liquid	Gas				Sludge
1.	WASTE COMBUSTABLE LIQUID NOS	COMBUSTABLE LIQUID	NA 1993	01	1	CT		X			1519K10	LBS	F001
2.											111010		
3.													
4.													
5.													
6.													

COMMENTS
Include Safety precautions and special handling instructions:
CONTAINS FREON, RQ TRICHLOROETHYLENE ORM-A, UN1710 AND PETROLEUM DISTILLATE UN 1218. DO NOT SMOKE NEAR OR BREATHE VAPORS. TO THE BEST OF THE GENERATOR'S KNOWLEDGE THIS WASTE CONTAINS NO PCB'S.

TRANSPORTER COMPLETES

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature ① <i>P. Blower</i>	Date Shipped MO. DAY YEAR 07 23 82
HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 637 Subsequent Transporter Vehicle I.D. No's	Transporter Signature ② <i>Butch Rozema</i> Subsequent transporter(s) signature(s) ③
If the shipment cannot be delivered, describe the reasons for non-delivery.		

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature ④ <i>D. Hunter</i> Facility Site EPA I.D. Number IND 01 6360265	Accepted Rejected	Date Received 7 23 82
Describe any significant discrepancies between manifest and shipment.	Was a Surcharge Assessed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-24 HOURS PER DAY.

TSDF COPY To 210 R T-50 GRM 7.23.82

WASTE DISPOSAL MANIFEST

 Act 64 Waste (HAZARDOUS)

 Act 136 Waste

 Other

MI0140962

IDENTIFICATION	Generator's Name ROCHESTER PRODUCTS DIVISION GMC	Primary Transporter's Name VALLEY CITY REFUSE DISPOSAL, INC	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICES
	Site Address 2100 BURLINGAME GRAND RAPIDS, MI 49501	Transporter's Address 2640 THORNWOOD ST SW WYOMING, MI 49509	Facility Address 420 S. COLFAX AVE. BRIEFITH, IN 46319
	Phone Number (616) 247-5201	Phone Number (616) 538-8499	Phone Number (313) 697-7830
	Generator's EPA I.D. Number 1017079625	Transporter's EPA I.D. Number 102055855373	Facility Site EPA I.D. Number MI0048090633

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name)	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container			Form			Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type		Solid	Liquid	Gas			
1.	WASTE COMBUSTABLE LIQUID NOS	COMBUSTABLE LIQUID	NA 1993	01	1	CT		X			2900 gal	FOPL	
2.											20560 LB		
3.													
4.													
5.													
6.													

COMMENTS Include Safety precautions and special handling instructions:
 CONTAINS FREON, TO TRICHLOROETHYLENE ORM-A, UN1710 AND PETROLEUM DISTILLATE UN 1228. DO NOT SMOKE NEAR OR BREATHE VAPORS. TO THE BEST OF THE GENERATOR'S KNOWLEDGE, THIS WASTE CONTAINS NO PCB'S.

TRANSPORTER COMPLETES

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature <i>[Signature]</i>	Date Shipped MO. DAY YEAR 11/15/82
HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 637 Subsequent Transporter Vehicle I.D. No's	Transporter Signature <i>[Signature]</i> Date(s) Received 11/15/82

If the shipment cannot be delivered, describe the reasons for non-delivery:

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Site EPA I.D. Number MI001620265	Accepted <input checked="" type="checkbox"/> Rejected <input type="checkbox"/>	Date Received 11/15/82
Describe any significant discrepancies between manifest and shipment:	Was a Surcharge Assessed?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4708 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

To 210 R.T-50 GRM 11/15/82
TSDF COPY

003639

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115912

997012

Authorization Number 8 13

V. J. DOLAN & COMPANY, INC

1830 NORTH LARAMIE AVENUE

CHICAGO (Company Name)

ILLINOIS Address 60639

0316000285 G

14 Generator Number 24

ILD 005098629

City State Zip

WASTE HAULER(S)

(1) STRAND TRUCKING
Hauler Name

13642 KENTON
Hauler Address

ILT000646810

S.W.H. Registration Number 25 31

(2) AMERICAN CHEMICAL
Hauler Name

GRIFFITH IND
Hauler Address

S.W.H. Registration Number 0024002 32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

P.O. BOX 190

91808902

(Facility Name)

Address

39 Site Number 46

GRIFFITH

INDIANA

46319

City State Zip

IND016360765

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE-PAINT;
FLAMMABLE LIQUID

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE-PAINT; FLAMMABLE LIQUID

UN1263/F005

F005

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/6/82

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED:

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Thomas Stone
(Authorized Signature)

DATE: 01/06/82 54 59

(2) _____
(Authorized Signature)

DATE: ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 1/6/82 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

On Dock 1/6/82 GRM
To 125 R T-63 GRM 1/6/82

003640

COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115914

Authorization Number 997012

V. J. DOLAN & CO
(Company Name)

1830 NORTH LARAMIE AVENUE
Address

0316000285
Generator Number

CHICAGO
City

ILLINOIS
State

60639
Zip

ILD 005098629

WASTE HAULER(S)

ILT000646810

(1) STRAND TRUCKING
Hauler Name

13642 N. KENTON
CRESTWOOD, IL.
Hauler Address

S.W.H. Registration Number 9024901

(2) _____
Hauler Name

Hauler Address

S.W.H. Registration Number _____

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE
(Facility Name)

P.O. BOX 190
Address

91808902
Site Number

GRIFFITH
City

INDIANA
State

46319
Zip

IND 016360265
2024004

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE-PAINT; FLAMMABLE LIQUID

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE-PAINT; FLAMMABLE LIQUID

UN1263/F005

F005

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/19/82

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 00727.0

2 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

35
DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [Signature]
(Authorized Signature)

DATE: 8/18/82

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[Signature]
(Authorized Signature)

DATE: 5/19/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

On dock 5-18-82 GRM
To 126R T-63 GRM 5-19-82

003841

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115913
1 7

Authorization Number 997012
8 13

V. J. DOLAN & COMPANY, INC

1830 NORTH LARAMIE AVENUE

(Company Name)

Address

CHICAGO

ILLINOIS

60639

0316000285

14 Generator Number 24

City

State

Zip

ILD 005098629

WASTE HAULER(S)

ILT000646810

(1) STRAND TRUCKING

13642 KENTON

S.W.H. Registration Number 0024001
25 31

Hauler Name

Hauler Address

(2) _____
Hauler Name

Hauler Address

S.W.H. Registration Number _____
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

P.O. BOX 190

91808902

(Facility Name)

Address

GRIFFITH

INDIANA

46319

39 Site Number 46

City

State

Zip

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ~~WASTE PAINT, FLAMMABLE LIQUID~~

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE-PAINT; FLAMMABLE LIQUID

UN1263/F005

F-005

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-18-82

Robert Dolan
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2000
47 52

1 GALLONS (Circle One)
2 CO. YDS. 53

METHOD OF SHIPMENT (Circle One)

40 DRUMS

TANK TRUCK

OPEN TRUCK

OTHER HAH (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Thomas Strand*
(Authorized Signature)

DATE: 03/18/82
34 39

(2) _____
(Authorized Signature)

DATE: ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Michael P. Burg
(Authorized Signature)

DATE: 3/18/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS -

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

To 125K T-63 6PM 3/18/82

003642

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115915

Authorization Number ~~997017~~

V. J. DOLAN & CO
(Company Name)
CHICAGO
City

1830 N LARAMIE AVENUE
Address
ILLINOIS
State
60639
Zip

0316000285
Generator Number
IID 005098629

WASTE HAULER(S)

(1) STRAND TRUCKING
Hauler Name

13640 S KENTON CRESTWOOD, ILL
Hauler Address

312-385-8440
S.W.H. Registration Number
ILT000646810
002400

(2) ~~XXXXXXXXXXXXXXXXXXXX~~
Hauler Name

~~XXXXXXXXXXXX~~
Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM SERVICE
(Facility Name)
GRIFFITH
City

P.O. Box 190
Address
INDIANA
State
46319
Zip

312-768-3400
92808903
Site Number
IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE, PAINT
FLAMMABLE LIQUID

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARDOUS CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

WASTE-PAINT; FLAMMABLE LIQUID
F005

HAZARD CLASS:

UN1263/F005

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8-26-82

[Signature]
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0.3465

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [Signature]
(Authorized Signature)

DATE: 8/20/82

(2) _____
(Authorized Signature)

DATE: ___/___/___

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.

[Signature]
(Authorized Signature)

DATE: 8/26/82

COMMENTS OR SPECIAL INSTRUCTIONS: _____

T0126 KT-63 GRM 8-26-82

003643

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115916
1 7

Authorization Number _____ 13

V. J. DOLAN & COMPANY, INC 1830 N LARAMIE AVENUE
(Company Name) Address
CHICAGO ILLINOIS 60639
City State Zip

0316000285 G
14 Generator Number 24
ILD005098629

WASTE HAULER(S)
(1) STRAND TRUCKING 13640 S KENTON CRESTWOOD, ILL
Hauler Name Hauler Address

S.W.H. Registration Number 0024002
~~91200000~~ 25 31

(2) _____
Hauler Name Hauler Address

IND 016360265
S.W.H. Registration Number 000646910
ILT 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE P.O. BOX 190
(Facility Name) Address
GRIFFITH INDIANA 46319
City State Zip

91808902
Site Number 46
IND 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE, PAINT
FLAMMABLE LIQUID

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:
WASTE-PAINT, FLAMMABLE LIQUID
F005

HAZARD CLASS:
UN1263/F005

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11-9-82
Jim Dolan
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2035
47 52
GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One) 37 DRUMS TANK TRUCK OPEN TRUCK OTHER UP4 (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jim Batt
(Authorized Signature)
(2) _____
(Authorized Signature)

DATE: 11/9/82
54 59
DATE: _____
60 65

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Michael P. Berg
(Authorized Signature)

DATE: 11/9/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS: 800 / 424-8802
DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

To 125R T-63 GRM 11-9-82

003044

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115907
1 7

V.J. DOLAN & COMPANY, INC.
(Company Name)

1830 NORTH LARAMIE AVENUE
Address

Authorization Number 997012
8 13

CHICAGO
City

ILLINOIS
State

60639
Zip

0316000285
14 Generator Number 24

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE
Hauler Name

P.O. BOX 190 GRIFFITH, IND.
Hauler Address

S.W.H. Registration Number 0024001
25 31

(2) SIRAUD TRUCKING
Hauler Name

CRESTWOOD
Hauler Address

~~0024001~~
S.W.H. Registration Number 000646810
38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE
(Facility Name)

P.O. BOX 190
Address

91808902
39 Site Number 46

GRIFFITH
City

INDIANA
State

46319
Zip

IND 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT & PAINT SOLVENT

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

PAINT

CLASS 55 FLAMMABLE LIQUID

PAINT SOLVENT

CLASS 55 FLAMMABLE LIQUID

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/20/80 FDOS

[Signature]
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 002255
47 52 GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER

VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) William J. Sylvester
(Authorized Signature)

DATE: 11/20/80
54 59

(2) _____
(Authorized Signature)

DATE: 1 1

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[Signature]
(Authorized Signature)

DATE: 11 21, 90
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: Unloaded on dock 11-21 Pumped to 129TR 11-24-80

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

003645

COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115908

Authorization Number 9 9 7 0 1 2

V. J. DOLAN & COMPANY, INC 1830 NORTH LARAMIE AVENUE CHICAGO, ILLINOIS
(Company Name) Address
CHICAGO ILLINOIS 60639
City State Zip

Generator Number 0 3 1 6 0 0 0 2 8 5
FED I.D.# ILD005098629

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE P.O. BOX 190 GRIFFITH, INDIANA
Hauler Name Hauler Address

S.W.H. Registration Number 0024001

(2) STRAND TRUCKING CRESTWOOD, IL.
Hauler Name Hauler Address

ILT000646810
S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE P.O. BOX 190
(Facility Name) Address
GRIFFITH INDIANA 46319
City State Zip

91803901
Site Number
IND0016360165

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE-PAINT: FLAMMABLE LIQUID

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

WASTE-PAINT; FLAMMABLE LIQUID

HAZARD CLASS:

UN1263/F005

F005

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/12/81

[Signature]
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 002300

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (VAN) (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *[Signature]*
(Authorized Signature)

DATE: 03/12/81

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[Signature]
(Authorized Signature)

DATE: 3/12/81

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 3/12/81 PUMPED TO 125K 3/17/81

T-63 Jim Mungy

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

003646

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115909

V. J. DOLAN & COMPANY 1830 NORTH LARAMIE AVENUE

Authorization Number 9 9 7 0 1 2

(Company Name)
CHICAGO

ILLINOIS

Address

60639

0 3 1 6 0 0 0 2 8 5

City

State

Zip

Generator Number

FED I.D. # ILD005098629

WASTE HAULER(S)

(1) STRAND TRUCKING 1743 S. KENTON

Hauler Name

Hauler Address

CRESTWOOD, IL

S.W.H. Registration Number 0024002

ILT 000646810

(2) _____
Hauler Name

Hauler Address

S.W.H. Registration Number _____

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE P.O. BOX 190

(Facility Name)

Address

9 1 8 0 8 9 0 2

Site Number

GRIFFITH

INDIANA

46319

IND016360265

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE-PAINT: FLAMMABLE LIQUID

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

WASTE-PAINT, FLAMMABLE LIQUID

F905

HAZARD CLASS:

UN1263/F086

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/18/81

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 0 0 2 2 0 0

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER

(Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) _____
(Authorized Signature)

DATE: 5/18/81

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Michael O. Deuge
(Authorized Signature)

DATE: 5/15/81

COMMENTS OR SPECIAL INSTRUCTIONS: UNLOADED AT DOCK 5/18/81

TO 125X T-63 5/19/81 JFM

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

003847

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115910

V. J. DOLAN & COMPANY, INC **1830 NORTH LARAMIE AVENUE**
(Company Name) Address
CHICAGO, IL **ILLINOIS** **60639**
City State Zip

Authorization Number **9 9 7 0 1 2**
Generator Number **0 3 1 6 0 0 0 2 8 5**
ILD005098629

(1) **STRAND TRUCKING**
Hauler Name
13647 KENTON CLEVELAND
Hauler Address

WASTE HAULER(S)
S.W.H. Registration Number **ILT000646870**
0311003

(2) _____
Hauler Name Hauler Address

S.W.H. Registration Number _____

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE **P.O. BOX 190**
(Facility Name) Address
GRIFFITH INDIANA **46319**
City State Zip

Site Number **9 1 8 0 8 9 0 2**
TDD016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: **WASTE-PAINT;**
FLAMMABLE LIQUID

WASTE PHASE: **LIQUID**
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DDT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

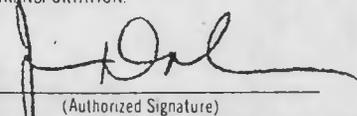
SHIPPING DESCRIPTION:
WASTE-PAINT; FLAMMABLE LIQUID F005

HAZARD CLASS:
F005--UN1263

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: **8/19/81**


(Authorized Signature)

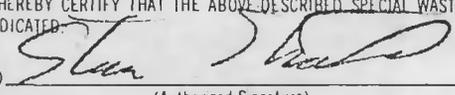
WASTE HAULER*

QUANTITY OF WASTE RECEIVED: **53 drums**
2915
51 52 53

1 GALLONS (Circle One)
2 CU. YDS

METHOD OF SHIPMENT (Circle One) **DRUMS** TANK TRUCK OPEN TRUCK OTHER **VAN** (Specify)

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) 
(Authorized Signature)

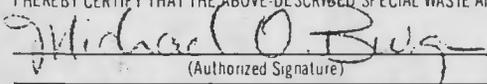
DATE: **8/19/81**
54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.


(Authorized Signature)

DATE: **8/20/81**
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: **To 124R 8/19/81 T-63 gm**

003648

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0115911

Authorization Number 9 9 7 0 1 2

V. J. DOLAN & COMPANY, INC 1830 NORTH LARAMIE AVENUE
(Company Name) Address

0 3 1 6 0 0 0 2 8 5 G
14 Generator Number 24

CHICAGO, ILLINOIS 60639
City State Zip

ILD005098629
ILT000646810

(1) STRAND TRUCKING 13642 KENTON CRESTWOOD, ILL
Hauler Name Hauler Address

S.W.H. Registration Number ~~91888888~~
25 31

(2) AMERICAN CHEM. GRIFFITH, ILL.
Hauler Name Hauler Address

S.W.H. Registration Number 0024001
32 38

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE P.O. BOX 190
(Facility Name) Address

9 1 8 0 8 9 0 2
39 Site Number 46

GRIFFITH INDIANA 46319
City State Zip

ILD0163360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE PAINT;
FLAMMABLE LIQUID

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE PAINT, FLAMMABLE

F005 UN1263

LIQUID F005

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/25/81

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 002090
47 52

1 GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One) 38

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) James Butler
(Authorized Signature)

DATE: 10/28/81
54 59

(2)
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Melvin (Signature)
(Authorized Signature)

DATE: 10/28/81
60

COMMENTS OR SPECIAL INSTRUCTIONS: TRAILER SPOTTED 10/28/81
TO 125 R T-63 6PM 11/3/81

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

003649

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

7 N2 51

TO: T/S/D FACILITY American Chemical Service E.P.A. ID Code No. IHD 0616360265 Address 420 S. Colfax Avenue Destination Griffith, Indiana Phone 219-924-4370	FROM: Generator R.R. DONNELLEY & SONS CO. E.P.A. ID Code No. IND 00540713 Address OLD ROUTE 30 WEST Origin WARSAW, INDIANA 46580 Phone 219-267-8233
---	--

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5000	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignee, the consignee shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES
 PREPAID COLLECT

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY R.R. DONNELLEY & SONS CO.	CONTACT Name MAX FAULKNER
E.P.A. ID Code No. IND 00540713	Phone 219-267-8233
Address OLD ROUTE 30 WEST	National Response Center 1-800-424-8802
Destination WARSAW, INDIANA 46580	in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date 1/7

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD069506160
 Address 201 West 155th St.
 City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date 1-7-82

TRANSPORTER #2 _____ E.P.A. ID No. _____
 Address _____
 City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
 Signature _____ Date 1-7-82

T/S/D F COPY To 210R T-50
ERM 1/7/82

003650

HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

52

TO: T/S/D FACILITY <u>American Chemical Service</u> E.P.A. ID Code No. <u>IND 0616360265</u> Address <u>420 S. Colfax Avenue</u> Destination <u>Griffith, IN</u> Phone <u>219-924-4370</u>	FROM: Generator <u>R.R. DONNELLEY & SONS CO.</u> E.P.A. ID Code No. <u>IND 005480710</u> Address <u>OLD ROUTE 30 WEST,</u> Origin <u>WARSAW, INDIANA 46080</u> Phone <u>219-247-8288</u>
--	--

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. ID No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
4,500 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid
4700						

PLACARDS REQUIRED Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____

Subject to Section F of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES
 PREPAID COLLECT

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY <u>R.R. DONNELLEY & SONS CO.</u> E.P.A. ID Code No. <u>IND 005480710</u> Address <u>OLD ROUTE 30 WEST</u> Destination <u>WARSAW, INDIANA 46080</u>	CONTACT Name <u>MAX FAULKNER</u> Phone <u>219-267-8288</u> National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. IND 069506160
 Address 201 West 155th St.
 City South Holland State IL Zip 60473 Phone 312-596-3377

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
 Address _____
 City _____ State _____ Zip _____ Phone _____

Transporter No. 2 Signature _____ Date _____

This is to certify acceptance of the hazardous waste shipment.

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature _____ Date 1-18-82

T/S/D F COPY To 211R T-50 6244
1/15/82

003651

HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

02 55

TO: T/S/D FACILITY American Chemical Service E.P.A. ID Code No. IND 0616360265 Address 420 S. Colfax Avenue Destination Griffith, IN 46319 Phone 219-924-4370	FROM: Generator R.R. DONNELLEY & SONS CO. E.P.A. ID Code No. IND 005680710 Address OLD ROUTE 30 WEST Origin WARSAW, INDIANA 46580 Phone 219-267-8223
--	---

HAZARDOUS WASTE

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat. ID No	EPA Haz Waste No	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN 1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____	FREIGHT CHARGES PREPAID <input type="checkbox"/> COLLECT <input type="checkbox"/> (Signature of Consignor) _____
---	---

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY R.R. DONNELLEY & SONS CO. E.P.A. ID Code No. IND 005680710 Address OLD ROUTE 30 WEST Destination WARSAW, INDIANA 46580	CONTACT Name RAY FRANKNER Phone 219-267-8223 National Response Center in D. C. 1-800-424-8802 / 426-2675

CERTIFICATION
 This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____	TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. IND 069506860 Address 271 West 155th St City South Holland State IL Zip 60473 Phone 312-536-3377
--------------------------------------	---

This is to certify acceptance of the hazardous waste shipment.
 Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ Address _____ City _____ State _____ Zip _____ Phone _____	E.P.A. ID No. _____ This is to certify acceptance of the hazardous waste shipment. Transporter No. 2 Signature _____ Date _____
---	---

TREATMENT/STORAGE/DISPOSAL FACILITY
 This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature Bob Mank	Date 02-5-82
--	---------------------

To 125 R T/S/D F COPY
 T-63 GRM 2/5/82

003852

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

12 58

TO: T/S/D FACILITY American Chemical Service E.P.A. ID Code No. IND 016360265 Address 420 S. Colfax Avenue Destination Griffith, Ind 46319 Phone 219-924-4370	FROM: Generator R.R. DONNELLEY & SONS CO. E.P.A. ID Code No. IND 005480710 Address OLD ROUTE 30 WEST Origin WARSAW, INDIANA 46580 Phone 219-267-5293
--	---

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat. I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5000 <i>5500 gal</i>	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____

<small>Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</small>	FREIGHT CHARGES
<small>(Signature of Consignor)</small>	PREPAID <input checked="" type="checkbox"/> COLLECT <input type="checkbox"/>

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY R.R. DONNELLEY & SONS CO.	CONTACT Name MAX FAULKNER
E.P.A. ID Code No. IND 005480710	Phone 219-267-5293
Address OLD ROUTE 30 WEST	National Response Center 1-800-424-8802
Destination WARSAW, INDIANA 46580	in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature *R.R. Donnelley & Sons Co.* Date 3/3/82

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. IND 069506160
 Address 201 West 155th St.
 City South Holland State IL Zip 60473 Phone 312-596-3377

Transporter No. 1 Signature *[Signature]* Date 3/3/82

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #2 _____ E.P.A. ID No. _____
 Address _____
 City _____ State _____ Zip _____ Phone _____

Transporter No. 2 Signature _____ Date _____

This is to certify acceptance of the hazardous waste shipment.

TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
 Signature *[Signature]* Date 3/3/82

T/S/D F COPY TO 210K
 T-50 6RM 3/3/82
 003654

HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

12 64

TO:
 T/S/D FACILITY American Chemical Service
 E.P.A. ID Code No. Ind 016360265
 Address 420 S. Colfax Ave.
 Destination Griffith, IN. 46319
 Phone 219-324-4370

FROM:
 Generator R.J. DONNELLEY & SONS CO.
 E.P.A. ID Code No. IND 005480710
 Address OLD ROUTE 30 WEST
 Origin WARSAW, INDIANA 46580
 Phone 219-267-8288

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat. ID No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse to the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES
 PREPAID COLLECT

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)
 T/S/D FACILITY R.J. DONNELLEY & SONS CO.
 E.P.A. ID Code No. IND 005480710
 Address OLD ROUTE 30 WEST
 Destination WARSAW, INDIANA 46580

EMERGENCY RESPONSE INFORMATION
 CONTACT Name MAX PARKER
 Phone 219-267-8288
 National Response Center 1-800-424-8802
 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature [Signature] Date [Date]

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
 Address 201 West 155th St.
 City South Holland State IL Zip 60473 Phone 312-596-3377

Transporter No. 1 This is to certify acceptance of the hazardous waste shipment.
 Signature [Signature] Date [Date]

TRANSPORTER #2 _____ E.P.A. ID No. _____
 Address _____
 City _____ State _____ Zip _____ Phone _____

Transporter No. 2 This is to certify acceptance of the hazardous waste shipment.
 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
 T/S/D FACILITY Signature [Signature] Date [Date]

T/S/D F COPY To 210 R T-50
 GRM 4-30-82

003657

HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

NE 66

TO: T/S/D FACILITY American Chemical Service E.P.A. ID Code No. IND 016360265 Address 420 S. Colfax Ave. Destination Griffith, IN 46319 Phone 219-924-4370	FROM: Generator R.R. DONNELLEY & SONS CO. E.P.A. ID Code No. IND 005480710 Address OLD ROUTE 30 WEST Origin WARSAW, INDIANA 46980 Phone 219-267-8283
---	---

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	U11210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the carrier's part, the carrier shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Signature of Consignor: _____

FREIGHT CHARGES: PREPAID COLLECT

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY R.R. DONNELLEY & SONS CO. E.P.A. ID Code No. IND 005480710 Address OLD ROUTE 30 WEST Destination WARSAW, INDIANA 46980	CONTACT Name MAX FAULKNER Phone 219-267-8283 National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature R.R. Donnelly & Sons Co. Date 5/14/82

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 063506160
 Address 201 West 155th St.
 City South Holland State IL Zip 60473 Phone 312-596-3377

Transporter No. 1 Frank Inc. This is to certify acceptance of the hazardous waste shipment. Date 5/14/82

TRANSPORTER #2 _____ E.P.A. ID No. _____
 Address _____
 City _____ State _____ Zip _____ Phone _____

Transporter No. 2 _____ This is to certify acceptance of the hazardous waste shipment. Date 5/14/82

TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY Frank Inc. This is to certify acceptance of the hazardous waste for treatment, storage, or disposal. Date 5/14/82

T/S/D F COPY TO 211K T-50
6RM 5/14/82

003858

HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

THIS SHIPPING ORDER must be legibly filled in, in ink in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

N2 68

TO: T/S/D FACILITY <u>American Chemical Service</u> E.P.A. ID Code No. XXXXXX <u>IND 016360265</u> Address <u>420 S. Colfax Ave.</u> Destination <u>Griffith, IND 46319</u> Phone <u>219-924-4370</u>	FROM: Generator R.R. DONNELLEY & SONS CO. E.P.A. ID Code No. <u>IND 005480710</u> Address <u>OLD ROUTE 30 WEST</u> Origin <u>WARSAW, INDIANA 46580</u> Phone <u>219-267-9298</u>
--	---

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____

(Signature of Consignor)

FREIGHT CHARGES
 PREPAID COLLECT

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY <u>R.R. DONNELLEY & SONS CO.</u> E.P.A. ID Code No. <u>IND 005480710</u> Address <u>OLD ROUTE 30 WEST</u> Destination <u>WARSAW, INDIANA 46580</u>	CONTACT Name <u>MAX FAULKNER</u> Phone <u>219-267-9298</u> National Response Center <u>1-800-424-8802</u> in D. C. <u>426-2675</u>

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature Jim F. Moeck Date 6-14-82

TRANSPORTER #1 Mr. Frank, Inc. E.P.A. ID No. ILD 069506160
 Address 201 West 155th St.
 City South Holland State IL Zip 60473 Phone 312-596-3377

Transporter No. 1 Signature [Signature] Date 6-14-82

TRANSPORTER #2 _____ E.P.A. ID No. _____
 Address _____
 City _____ State _____ Zip _____ Phone _____

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY _____ This is to certify acceptance of the hazardous waste for treatment, storage, or disposal _____
 Signature [Signature] Date 6/14/82

TRANSPORTER #1 COPY TO 211KT-50
GRM 6/14/82

003889

HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

71 71

TO: T/S/D FACILITY <u>American Chemical Service</u> E.P.A. ID Code No. <u>IND 016360265</u> Address <u>420 S. Colfax Avenue</u> Destination <u>Griffith, IN 46319</u> Phone <u>219-924-4370</u>	FROM: Generator <u>R.R. DONNELLEY & SONS CO.</u> E.P.A. ID Code No. <u>IND 005480710</u> Address <u>OLD ROUTE 30 WEST</u> Origin <u>WARSAW, INDIANA 46580</u> Phone <u>219-257-0203</u>
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No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. ID No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED <u>Flammable</u> NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____	FREIGHT CHARGES PREPAID <input checked="" type="checkbox"/> COLLECT <input type="checkbox"/> (Signature of Consignor) _____
---	--

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY) T/S/D FACILITY <u>R.R. DONNELLEY & SONS CO.</u> E.P.A. ID Code No. <u>IND 005480710</u> Address <u>OLD ROUTE 30 WEST</u> Destination <u>WARSAW, INDIANA 46580</u>	EMERGENCY RESPONSE INFORMATION CONTACT Name <u>MAX PAULKNER</u> Phone <u>219-257-0203</u> National Response Center 1-800-424-8802 in D. C. 426-2675
---	--

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____	Date _____
TRANSPORTER #1 <u>Mr. Frank Inc.</u> E.P.A. ID No. <u>IND 069506160</u> Address <u>201 West 155th St.</u> City <u>South Holland</u> State <u>IL</u> Zip <u>60473</u> Phone <u>312 576 3377</u>	This is to certify acceptance of the hazardous waste shipment. Transporter No. 1 Signature _____ Date _____
TRANSPORTER #2 _____ E.P.A. ID No. _____ Address _____ City _____ State _____ Zip _____ Phone _____	This is to certify acceptance of the hazardous waste shipment. Transporter No. 2 Signature _____ Date _____
TREATMENT/STORAGE/DISPOSAL FACILITY This is to certify acceptance of the hazardous waste for treatment, storage, or disposal. T/S/D FACILITY Signature <u>[Signature]</u> Date <u>8/16/82</u>	

T-21137-50 T/S/D F COPY
GLM 8-16-82

003060

HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

72 72

TO: T/S/D FACILITY American Chemical Service E.P.A. ID Code No. IND 016360265 Address 420 S. Colfax Ave. Destination Griffith, IN 46319 Phone 219-924-4370	FROM: Generator R.F. DONNELLEY & SONS CO. E.P.A. ID Code No. IND 005480710 Address OLD ROUTE 30 WEST Origin WARSAW, INDIANA 46588 Phone 219-257-8293
---	---

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat. ID No	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____

<small>Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse to the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</small>	FREIGHT CHARGES PREPAID COLLECT
<small>(Signature of Consignor)</small>	<input checked="" type="checkbox"/> <input type="checkbox"/>

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY R.F. DONNELLEY & SONS CO. E.P.A. ID Code No. IND 005480710 Address OLD ROUTE 30 WEST Destination WARSAW, INDIANA 46588	CONTACT Name MAX FAULKNER Phone 219-257-8293 National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. IND 069506160
 Address 201 West 155th St.
 City South Holland State IL Zip 60473 Phone 312-536-3377

Transporter No. 1 Signature _____ Date _____

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #2 _____ E.P.A. ID No. _____
 Address _____
 City _____ State _____ Zip _____ Phone _____

Transporter No. 2 Signature _____ Date _____

This is to certify acceptance of the hazardous waste shipment.

TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY This is to certify acceptance of the hazardous waste for treatment, storage, or disposal
 Signature [Handwritten Signature] Date 8/18/82

T/S/D F COPY TO 211 RT-50
 GRM 8.18.82

003861

HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

74

TO: T/S/D FACILITY <u>American Chemical Service</u> E.P.A. ID Code No. <u>IND 016360265</u> Address <u>420 S. Colfax Avenue</u> Destination <u>Griffith, IN 46319</u> Phone <u>219-924-4370</u>	FROM: Generator <u>R.R. DONNELLEY & SONS CO.</u> E.P.A. ID Code No. <u>IND 005480710</u> Address <u>OLD ROUTE 30 WEST</u> Origin <u>WARSAW, INDIANA 46580</u> Phone <u>219-267-0238</u>
---	---

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat. I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gal.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED <u>Flammable</u> <small>NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____</small>	<small>Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse to the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</small> FREIGHT CHARGES PREPAID <input checked="" type="checkbox"/> COLLECT <input type="checkbox"/> _____ <small>(Signature of Consignor)</small>
--	---

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY <u>R.R. DONNELLEY & SONS CO.</u> E.P.A. ID Code No. <u>IND 005480710</u> Address <u>OLD ROUTE 30 WEST</u> Destination <u>WARSAW, INDIANA 46580</u>	CONTACT Name <u>MAX FAULKNER</u> Phone <u>219-267-3238</u> National Response Center <u>1-800-424-8802</u> in D. C. <u>426-2675</u>

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature R.R. Donnelley & Sons Co. Date 1/26/72

TRANSPORTER #1 Mr. Frank Inc. E.P.A. ID No. ILD 069506160
 Address 201 West 155th St.
 City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature Frank Inc. Date 2/1/72

TRANSPORTER #2 _____ E.P.A. ID No. _____
 Address _____
 City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature F. D. ... Date 2/1/72

T/S/D F COPY

TO 210 RT-50
6111 8-26-82

003882

HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

72 77

TO: T/S/D FACILITY American Chemical Service E.P.A. ID Code No. ILD 016360265 Address 420 S. Colfax Ave. Destination Griffith, Ind 46319 Phone 219-924-4370	FROM: Generator R.R. DONNELLEY & SONS CO. E.P.A. ID Code No. IND 005486710 Address OLD ROUTE 30 WEST Origin WARSAW, INDIANA 46580 Phone 219-287-8283
--	---

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. ID No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED **Flammable**

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____

<small>Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignee, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</small>	FREIGHT CHARGES
<small>(Signature of Consignor)</small>	PREPAID <input type="checkbox"/> COLLECT <input checked="" type="checkbox"/>

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY R.R. DONNELLEY & SONS CO. E.P.A. ID Code No. IND 005486710 Address OLD ROUTE 30 WEST Destination WARSAW, INDIANA 46580	CONTACT Name MAX FAULKNER Phone 219-287-8283 National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 **Mr. Frank Inc.** E.P.A. ID No. **ILD 069506160**
 Address **201 W. 195th St.**
 City **South Holland** State **IL** Zip **60473** Phone **312-506-3377**

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date **12/11/82**

TRANSPORTER #2 _____ E.P.A. ID No. _____
 Address _____
 City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date **1**

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature _____ Date **12/11/82**

T/S/D F COPY To 210 RT-50
 EIM 10-1182
 003863

HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

112 - 79

TO: T/S/D FACILITY American Chemical Service	FROM: Generator R.R. DONNELLEY & SONS CO.
E.P.A. ID Code No. IND 016360265	E.P.A. ID Code No. IND 005490710
Address 420 S. Colfax Ave.	Address OLD ROUTE 30 WEST
Destination Griffith, IN 46319	Origin WARSAW, INDIANA 46580
Phone 219-924-4370	Phone 219-257-9283

No Shipping Unit	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. ID No	EPA Haz Waste No	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	Waste Ink - Bulk	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED Flammable	RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.	FREIGHT CHARGES PREPAID <input checked="" type="checkbox"/> COLLECT <input type="checkbox"/>
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ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY R.R. DONNELLEY & SONS CO.	CONTACT Name MAX FAULKNER
E.P.A. ID Code No. IND 005490710	Phone 219-257-9283
Address OLD ROUTE 30 WEST	National Response Center 1-800-424-8802
Destination WARSAW, INDIANA 46580	in D. C. 426-2675

CERTIFICATION
This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 **Mr. Frank** E.P.A. ID No. **IND 0054906180**
Address **201 W. 155th St.**
City **South Holland** State **IL** Zip **60473** Phone **312-536-3377**

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.
Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY
This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
T/S/D FACILITY Signature _____ Date _____

HAZARDOUS WASTE

To 210K T-50
GRW 11-19-82

T/S/D F COPY

003654

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

112 80

TO: T/S/D FACILITY American Chemical Service E.P.A. ID Code No. IND 016360265 Address 420 S. Collins, Griffith, IN 46319 Destination 219-924-4370 Phone	FROM: Generator R.R. DONNELLEY & SONS CO. E.P.A. ID Code No. IND 005480710 Address OLD ROUTE 30 WEST Origin WARSAW, INDIANA 46580 Phone 219-257-9238
---	---

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat. I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
5,000 Gals.	Waste Ink - Bulk (Toluene)	Flammable Liquid	UN1210	F005		Flammable Liquid

PLACARDS REQUIRED **Flammable**

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse to the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor) _____

FREIGHT CHARGES:
 PREPAID COLLECT

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY R.R. DONNELLEY & SONS CO. E.P.A. ID Code No. IND 005480710 Address OLD ROUTE 30 WEST Destination WARSAW, INDIANA 46580	CONTACT Name MAX FAULKNER Phone 219-257-9238 National Response Center 1-800-424-8802 in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature *R.R. Donnelley & Sons Co.* Date *1/15/82*

TRANSPORTER #1 Mr. Frank E.P.A. ID No. IND 069506169
 Address 201 W. 155th St.
 City South Holland State IL Zip 60473 Phone 312-596-3377

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 _____
 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
 Address _____
 City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 _____
 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY *F. Dumper* Date *1/24/82*
 Signature _____

T/S/D F COPY *To 211K T-50*
GPM 12/15/82

003665

HAZARDOUS WASTE

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0570781

Authorization Number 9 9 7 1 2 7
8 13

DUO-FAST CORPORATION 3702 RIVER ROAD 312-678-0100 0 3 1 0 9 6 0 0 2 6 6
(Company Name) Address Phone Number 14 Generator Number 24
FRANKLIN PARK ILLINOIS 60131 I L D 0 0 5 1 1 9 4 4 1
City State Zip EPA Number

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVENUE S.W.H. Registration Number 0 3 1 1 0 0 3
Hauler Name Hauler Address 25 31
GRIFFITH, INDIANA 46319 Phone Number EPA Number

STRAND TRUCKING CRESTWOOD ILL S.W.H. Registration Number 38
Hauler Name Hauler Address 32 38
Phone Number EPA Number
ILT 000646810

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVENUE 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
GRIFFITH, INDIANA 46319 Phone Number EPA Number
City State Zip
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS

WASTE PHASE: #3
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

SPENT SOLVENTS

FLAMMABLE

UN or NA Number

EPA HW Number

WEIGHT FOR D.O.T. USE 38000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004180 GALLONS (Circle One) 2 CU. YDS.
47 52 53

METHOD OF SHIPMENT (Circle One)

(DRUMS 76) Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 3-5-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

(2) (Authorized Signature)

DATE: 3 15 182
54 59

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE: / /
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

**24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 3/5/82 6PM 10 TO 20K T-50 6PM
66 To #2 Still T-63 4/12/82 4.12.82

003607

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0570783

Authorization Number 9 9 7 1 2 7
8 13

DUO-FAST CORPORATION 3702 RIVER ROAD 312-678-0100 0310960026
(Company Name) Address Phone Number 14 Generator Number 24
FRANKLIN PARK ILLINOIS 60131 ILD005119441
City State Zip EPA Number

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVENUE S.W.H. Registration Number 0311003
Hauler Name Hauler Address 25 31
GRIFFITH, INDIANA 46319 IND016360265
Phone Number EPA Number

STRAND TRUCKING

STRAND TRUCKING Hauler Name Hauler Address S.W.H. Registration Number 0024001
32 38
ILLT000646810
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVENUE 91808902
(Facility Name) Address 39 Site Number 46
GRIFFITH, INDIANA 46319 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: #3
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

SPENT SOLVENTS

FLAMMABLE

001993
UN or NA Number

F083
EPA HW Number

WEIGHT FOR D.O.T. USE 32400 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 4000 47 52 1 GALLONS (Circle One) 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS 80) Number

TANK TRUCK

OPEN TRUCK

(OTHER) Specify

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Thomas Linn
(Authorized Signature)

DATE: 4-6-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Thomas Linn*
(Authorized Signature)

DATE 04/06/82 54 59

(2) _____
(Authorized Signature)

DATE 1/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael E. Dwyer
(Authorized Signature)

DATE 4/16/82 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 4.6.82 6PM
To 210 RT-50 6PM 4.14.82

003888

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0570785

Authorization Number 9 9 7 1 2 7

DUO-FAST CORPORATION 3702 RIVER ROAD 312-67809199 0 3 1 0 9 6 0 0 2 6
(Company Name) Address Phone Number 14 Generator Number 24
FRANKLIN PARK ILLINOIS 60131 I L D 0 0 5 1 1 9 4 4 1
City State Zip EPA Number

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVENUE S.W.H. Registration Number 0024001
Hauler Name Hauler Address 25 31
GRIFFITH, INDIANA 46319 Phone Number IND 16360265
EPA Number

STRAND TRUCKING 13643 S. KENTON S.W.H. Registration Number _____
Hauler Name Hauler Address 32 38
CRISTWOOD, ILL. 312 3858440 Phone Number ILT 000646810
EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVENUE 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
GRIFFITH, INDIANA 46319 Phone Number IND 16360265
City State Zip EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: #3
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DDT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: SPENT SOLVENTS HAZARD CLASS: FLAMMABLE
UN or NA Number 001993 EPA HW Number F083

WEIGHT FOR D.O.T. USE 36.000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 0 0 4 4 0 0 GALLONS (Circle One) CU. YDS. 53
METHOD OF SHIPMENT (Circle One) (DRUMS 80) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Alton Scott DATE 6-1-82
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) Jim Batten DATE 6/01/82
(Authorized Signature) 54 59
(2) _____ DATE _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE
Jim Batten DATE 6/1/82
(Authorized Signature) 60 63

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2670
DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

COMPLETED BY GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0570784

Authorization Number 9 9 7 1 2 7

DUO-FAST CORPORATION 3702 RIVER ROAD 312-678-0100 0310960026G
FRANKLIN PARK ILLINOIS 60131 ILD005119441

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVENUE
GRIFFITH, INDIANA 46319
S.W.H. Registration Number 0024001
EPA Number 0311003

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVENUE
GRIFFITH, INDIANA 46319
EPA Number 91808902

TO BE COMPLETED BY WASTE GENERATOR
WASTE NAME: PAINT SOLVENTS WASTE PHASE: #3

SHIPPING DESCRIPTION: SPENT SOLVENTS HAZARD CLASS: FLAMMABLE
UN OR NA Number 001993 EPA HW Number F083
QUANTITY OF WASTE DELIVERED 3410
METHOD OF SHIPMENT (Circle One) (DRUMS 162) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION DATE: 5-10-82

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.
(1) R. Hull DATE: 05/10/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.
DATE: 5-10-82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

SITE COPY - PART 3 44-T0210 RT-50 6PM 1870119K
6:30-82 T-63 6PM
003870

STATE OF ILLINOIS

TC WA. COMPLETED BY GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0570786

Authorization Number 997127

DUO-FAST CORPORATION 3702 RIVER ROAD 312-678-0100 0310960026
FRANKLIN PARK ILLINOIS 60131 ILD005119441

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVENUE S.W.H. Registration Number 0024001
GRIFFITH, INDIANA 46319 INDO16360625

STRAND TRUCKING 13746 KEITON S.W.H. Registration Number 312385840

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVENUE 91808902
GRIFFITH, INDIANA 46319 317683400 INDO16360625

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: #3 (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: SPENT SOLVENTS HAZARD CLASS: FLAMMABLE

UN or NA Number 001993 EPA HW Number 1053

WEIGHT FOR D.O.T. USE 36000 LBS/TONS WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004400

METHOD OF SHIPMENT (Circle One) (DRUMS 80) TANK TRUCK OPEN TRUCK OTHER (Specify) UAA

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Authorized Signature

DATE: 9782

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

Authorized Signature

DATE: 9/7/82

Authorized Signature

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

Authorized Signature

DATE: 9/7/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2677

REV # 3

SITE COPY - PART 3

On dock 9.7.82
Solid MIX T-50 10-5-82

003071

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0570787
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 8 13

DUO-FAST CORPORATION 3702 RIVER ROAD 312-678-0100 0310960026 G
(Company Name) Address Phone Number 14 Generator Number 24
FRANKLIN PARK ILLINOIS 60131 ILD005119441
City State Zip EPA Number

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVENUE S.W.H. Registration Number 0024001
Hauler Name Hauler Address 25 31
GRIFFITH, IN 46319 3127683400 14D095256525
Phone Number EPA Number

STAND TRUCKING 13642 KENTON S.W.H. Registration Number
Hauler Name Hauler Address 32 38
3123858440 1LT0001046810
Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 S. COLFAX AVENUE 91808902
(Facility Name) Address 39 Site Number 46
GRIFFITH INDIANA 46319 3127683400 14D095256525
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: #3
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: SPENT SOLVENTS HAZARD CLASS: FLAMMABLE UN or NA Number 041593 EPA HW Number E002

WEIGHT FOR D.O.T. USE 30400 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 0041800 1 GALLONS (Circle One) 2 CU. YDS. 53
METHOD OF SHIPMENT (Circle One) (DRUMS 76) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION DATE: 10-4-82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) Stan Stamm (Authorized Signature) DATE: 10/18/82 54 59
(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE DATE: 10/18/82 60 65
(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 10.8.82 TO 120R T-63
GRM 10.20.82

003872

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NUMBER

60332

SHIPPER NUMBER

~~XXXXXX~~

STRAND TRUCKING

0024001

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	EPA # IND098647266	EAGLE PECHER PLASTICS 320 S. WABASH ASHLEY, IN 587-9155	11-11-81
TRANSPORTER # 1	ILT000642810	STRAND TRUCKING CO. P.O. BOX 190 GRIFFITH, IN 46319	11-11-81
TRANSPORTER # 2 (If required)			
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	AMERICAN CHEMICAL SERVICE P.O. BOX 190 GRIFFITH, IN 46319	11-11-81
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	A L T E R N A T E		

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
38 55 gal DRMS			FLAMMABLE LIQUID	NA1142			14630#	2090 GAL		
21 55 GAL drms			UN 1090 ACETONE FLAMMABLE LIQUID	UN1090			8085#	1155 GAL		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$

C.O.D. FEE:
PREPAID
COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID except when box is checked Check box if charges are to be collected

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

5

Trailer Spotted at dock 11/11/81 GRM

TSDF COPY

(22) To 109 TR T-63 GRM 11/17/81
(37) to 202 R T-50 GRM 12/31/81

003573

HAZARDOUS WASTE MANIFEST

#7
MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

Strand & American

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND016351272	Eagle Picher Plastics, 14123 Roth Road, Grabill, IN	11-11-81
TRANSPORTER # 1	ILT000646810	Strand Trucking & American Chemical Service, Crestwood, IL	11-11-81
TRANSPORTER # 2 (if required)	IND016360265	American Chemical Service, 420 S. Colfax Ave, Griffith IN	11-11-81
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
7 drums			Methylene Chloride	UN1593		385		7		
12 drums			Acetone	UN1090		55		1		
12 drums			Xylene	UN1307		110		12		

SPECIAL HANDLING INSTRUCTIONS

If an RO commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes No

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID FREIGHT COLLECT (if checked) Check box if charges are to be collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

5

STATE OF ILLINOIS

0514998

TO BE COMPLETED BY
WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 3 6 4 0
8 13

Eagle Converting Corp. 999 Lee Street (312) 593-5050 0314400081 G
(Company Name) Address Phone Number 14 Generator Number 24
Elk Grove Village Illinois 60007 IL DO 43362441
City State Zip EPA Number

WASTE HAULER(S)

Landgrabe Chicago, IL S.W.H. Registration Number IC C 2 9 8 0
Hauler Name Hauler Address 25 31
3 1 2 8 4 2 3 1 2 1 IND O 0 9 8 4 2 8 2 4
Phone Number EPA Number

Landgrabe P.O. Box 32, Valpraso, IN S.W.H. Registration Number
Hauler Name Hauler Address 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. 420 South Colfay 91808902
(Facility Name) Address 39 Site Number 46
Griffith Indiana 46319 2199424370 IN DO 16360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Waste Solvents WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid HAZARD CLASS: NOS.- Flam. U N 1 9 9 3 F 0 0 5
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE 4,000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 500 1 GALLONS (Circle One) CU. YDS. 1
47 52 53

METHOD OF SHIPMENT (Circle One) (DRUMS 10) TANK TRUCK OPEN TRUCK OTHER (Specify) _____
Number

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION William F. Senkuta DATE: 6/2/82
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) De Statten DATE: 6/2/82
(Authorized Signature) 54 59
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.
Frank Price DATE: 6/3/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR
REV. # 3

SITE COPY - PART 3

On dock 6.3.82 GRM
TO 112RT-63 GRM 6.4.82

003675

0514996

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number 919364
1258

TO BE COMPLETED BY
WASTE GENERATOR

Eagle Converting 999 Lee Street 3125935050 0314400081
(Company Name) Address Phone Number Generator Number

Elk Grove Ill. 60007 I L D 0 4 3 3 6 2 4 4 1
City State Zip EPA Number

Landgrebe Chicago, Ill.
Hauler Name Hauler Address S.W.H. Registration Number ICC 2980

3128423121 IN D 0 0 9 8 4 2 8 2 4
Phone Number EPA Number

Landgrebe P.O. Box 32, Valparao, IND.
Hauler Name Hauler Address S.W.H. Registration Number

Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Serv. 420 S. Colfax 91808902
(Facility Name) Address Site Number

Griffith Indiana 46319 219942437 O I N D O 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number

City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Waste Solvents WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Flammable Liquid HAZARD CLASS: NOS.=Flam.
UN 1993 B 005
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE 4,000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 500 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 10) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
Authorized Signature DATE: 2-4-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

Authorized Signature DATE: 2/5/82

Authorized Signature DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Authorized Signature DATE: 2/2/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 2/5/82 6RM
to 210 RT-50 6RM 2/19/82

003876

STATE OF ILLINOIS

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0514997

Authorization Number 993640

EAGLE CONVERTING 999 LEE ST. 312 593 5050 0314400081
(Company Name) Address Phone Number Generator Number

ELK GROVE ILL 60007
City State Zip EPA Number

WASTE HAULER(S)

LANDGREBE CHGO. ILL.
Hauler Name Hauler Address S.W.H. Registration Number ICC 2980

3128423121 Phone Number IND009842824 EPA Number

Hauler Name Hauler Address Phone Number EPA Number

AMER. CHEM. SERV. 420 S. COLFAX 91808902
(Facility Name) Address Site Number

GRIFFITH IND 46319 2199424320 IND0016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE LIQ NOS. FLAM. HAZARD CLASS: UN1993 EPA HW Number F005

WEIGHT FOR D.D.T. USE 4,406 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 550 GALLONS (Circle One) 1 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS 11) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION. William Leubach (Authorized Signature) DATE: 4-7-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 4/7/82

(2) (Authorized Signature)

DATE: 4/7/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 4/8/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 4.12.82 GRM
T0112R T-63 GRM 4.14.82

003677

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0647459

Authorization Number NEBANA

TO BE COMPLETED BY
WASTE GENERATOR

EAGLE CONVERTING CORP 999 LEE STREET 312 593 5050 0314400081
(Company Name) Address Phone Number Generator Number
ELK GROVE VILLAGE IL 60007 IL 0043362441
City State Zip EPA Number

WASTE HAULER(S)
LANOGREBE CHICAGO, ILL. 4649 MCR
MOTOR TRANSP. Hauler Name Hauler Address S.W.H. Registration Number
3128423121 IND009842824
Phone Number EPA Number
Hauler Name Hauler Address S.W.H. Registration Number
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
AMER. CHEM. SERV. 420 S. COLFAX 91808902
(Facility Name) Address Site Number
GRIFFITH IND. 46319 2199244370 IND
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: FLAMMABLE LIQUID NOS-FLAM. HAZARD CLASS: UN1993 F005
UN or NA Number EPA HW Number
WEIGHT FOR D.O.T. USE: 4000 LBS WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 500 GALLONS (Circle One)
CONVERTED TO CU. YDS. OR GAL. 47 52 2 CU. YDS. 53
METHOD OF SHIPMENT (Circle One) DRUMS 10 TANK TRUCK OPEN TRUCK OTHER (Specify) Number

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION [Signature] DATE: 10-6-82
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED
[Signature] DATE: 10/6/82
(1) (Authorized Signature) 54 59
(2) (Authorized Signature) DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
Frank [Signature] DATE: 10/17/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: _____

Ondock 10/7/82 To 204RT-50
ERM 10/13/82
003878

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0459232

Authorization Number 992395

ELSTON PAINT (Company Name) 4181 ELSTON (Address) 312 463 3370 (Phone Number) 0316000814 (Generator Number)
CHICAGO (City) ILL (State) 60618 (Zip) _____ (EPA Number)

WASTE HAULER(S)

AMERICAN CHEMICAL CO (Hauler Name) 420 S COLFAX (Hauler Address) 312 768 3400 (Phone Number) 0024007 (S.W.H. Registration Number)
_____ (Hauler Name) _____ (Hauler Address) _____ (Phone Number) _____ (S.W.H. Registration Number)

AMERICAN CHEMICAL CO (Facility Name) 420 S COLFAX (Address) 91808902 (Site Number)
GRIFFITH (City) INDIANA (State) 46319 (Zip) 312 768 3400 (Phone Number) INDO 1626065 (EPA Number)
_____ (Alternate (Facility Name)) _____ (Address) _____ (City) _____ (State) _____ (Zip) _____ (Phone Number) _____ (EPA Number)

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DDT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

001993 (UN or NA Number)

_____ (EPA HW Number)

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 000150 (47) 150 (52) 1 (53) GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS (3) (Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Martin Bassett (Authorized Signature)

DATE: 4.24.82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) R. Hall (Authorized Signature)

DATE: 4.28.82

(2) _____ (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael O'Byrne (Authorized Signature)

DATE: 4/28/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 4-28-82 GRM
To 125 RT-63 GRM 5-3-82

003880

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0459233

Authorization Number 992395

ELSTON PAINT 4181 N. ELSTON 3124633320 0316000814
(Company Name) Address Phone Number Generator Number

CHICAGO ILL. 60618
City State Zip

WASTE HAULER(S)

AMERICAN CHEMICAL
Hauler Name

420 S. COLFAX
Hauler Address

3127683400
Phone Number

S.W.H. Registration Number 0024001

ENRD16360265
EPA Number

Hauler Name

Hauler Address

Phone Number

EPA Number

AMERICAN CHEMICAL
(Facility Name)

420 S. COLFAX
Address

IND. 91808902
Site Number

GRIFFITH
City

INDIANA
State

46319
Zip

3127683400
Phone Number

IND 01636026
EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENT

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE THINNER

FLAMMABLE

001993
UN or NA Number

K078
EPA HW Number

WEIGHT FOR
D.O.T. USE

425 LBS
(circle one) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 000050

0 GALLONS (Circle One)
CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(1)
(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

UAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Martin Bannat
(Authorized Signature)

DATE: 6.8.82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

James Balth
(Authorized Signature)

DATE

6/9/82

(2)

(Authorized Signature)

DATE

1/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael E. Bui
(Authorized Signature)

DATE

6/9/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On lock 6.8.82

To 125 FT-636PM
6.10.82

003881

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0459236

Authorization Number ~~992395~~

ELSTON PAINT 4181 N. ELSTON 3124633320 031600081A
(Company Name) Address Phone Number Generator Number
CHICAGO ILL. 60678
City State Zip EPA Number

WASTE HAULER(S)

AMERICAN CHEMICAL 420 S. COLFAX S.W.H. Registration Number 0024001
Hauler Name Hauler Address 25 31
3127683400
Phone Number EPA Number

ST. RAND TRUCKING 13641 KENTON S.W.H. Registration Number
Hauler Name Hauler Address 32 38
CRESTWOOD 385-84140 ILT000646810
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL 420 S. COLFAX 91808002
(Facility Name) Address 39 46
GRIFFITH INDIANA 46319 3127683400 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE HAZARD CLASS: 001993 EPA HW Number: F005

WEIGHT FOR D.O.T. USE: 1350 LBS (circle one) TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 000150 GALLONS (Circle One) CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 3 Number) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Martin Bayart (Authorized Signature) DATE: 8.18.82

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) Jim Batten (Authorized Signature) DATE: 8/18/82
(2) _____ (Authorized Signature) DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE Michael C. Buz (Authorized Signature) DATE: 8/18/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV # 3

SITE COPY - PART 3

T0124TR T-63 6PM 8.18.82

003882

STATE OF ILLINOIS

0459234

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number 8 13

ELSTON PAINT (Company Name) 4181 N. ELSTON (Address) 312 463 3320 (Phone Number) 031 600 0814 (Generator Number)
CHICAGO (City) ILLINOIS (State) 60618 (Zip)
EPA Number

WASTE HAULER(S)

AMERICAN CHEM (Hauler Name) 420 S. COLFAX (Hauler Address) 312 768 3400 (Phone Number) 002 400 (S.W.H. Registration Number)
STRAND TRUCKING (Hauler Name) 13642 S. KENTON (Hauler Address) 312 385 8440 (Phone Number) 0006 468 10 (S.W.H. Registration Number)
CRISTWOOD, ILL. (City) ILLINOIS (State) 60618 (Zip)
EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL (Facility Name) 420 S. COLFAX (Address) 7683400 (Phone Number) 016 360 265 (EPA Number)
GRIFFITH (City) INDIANA (State) 46319 (Zip)
Alternate (Facility Name) Address City State Zip Phone Number EPA Number Site Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE HAZARD CLASS: UN 1993 EPA HW Number: F005

WEIGHT FOR D.O.T. USE: 900 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 000 110 GALLONS (Circle One) CU. YDS. 1
METHOD OF SHIPMENT (Circle One) (DRUMS 2) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION. (Authorized Signature) DATE: 11-9-82

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature) DATE: 11/9/82
(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
(Authorized Signature) DATE: 11/9/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

STATE OF ILLINOIS

0514618

TO BE COMPLETED BY WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number 998785

A.L.Laboratories 9352 W. Grand Ave. 312-455-8700 0310960003
(Company Name) Address Phone Number 14 Generator Number 24

Franklin Park Illinois 60131 ILD048957120
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frank, Inc 201 W. 155th St. South Holland, Ill. 60374
Hauler Name Hauler Address S.W.H. Registration Number 0079029

312-596-3377 ILD06950616
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 EPA Number 38

Phone Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service P.O.Box 190 91808902
(Facility Name) Address 39 Site Number 46

Griffith Indiana 46319 312-768-3400 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46

City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR

WASTE NAME: Hexane, Methanol, Acetone, Toluene WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

UN1993 NA9189
UN or NA Number

D001 U154
U002 U220
EPA HW Number

WEIGHT FOR D.Q.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. DR GAL. QUANTITY OF WASTE DELIVERED: 002000
1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE: 3/19/82

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Tom Berry (Authorized Signature) DATE: 03/19/82

(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE. (Authorized Signature) DATE: 03/19/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

TO 210 R T-50 60M 3/19/82

003884

STATE OF ILLINOIS

0647556

TO BE COMPLETED BY
WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number 8 13

Naz Dar Company 1087 N Northbranch St. 312 943 8338 03 160 003 37 6
 (Company Name) Address Phone Number 14 Generator Number 24
Chicago **Illinois** **60622** **I L D 0 0 5 2 3 3 9 6 0**
 City State Zip EPA Number

WASTE HAULER(S)

Strand Trucking 13642 Kenton 0311012
 Hauler Name Hauler Address S.W.H. Registration Number 25 31
Crestwood, Illinois 60445 312 385 8440 **IL T000646810**
 Phone Number EPA Number
 Hauler Name Hauler Address S.W.H. Registration Number 32 38
 Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service P O Box 190 91808902
 (Facility Name) Address 39 Site Number 46
Griffin **Indiana** **46319** **312768340 QIND 016360265**
 City State Zip Phone Number EPA Number
 Alternate (Facility Name) Address 39 Site Number 46
 City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint Solvent WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW. (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Paint Solvent Red Label

UN1993
UN or NA Number

K078
EPA HW Number

WEIGHT FOR D.O.T. USE 12615 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 001595 (1 GALLONS) (Circle One) 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One) DRUMS 29 TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Elz Rudy DATE: 12/22/82
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jim Patton DATE: 12/22/82
 (Authorized Signature) 54 59
 (2) _____ DATE: _____
 (Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: Michael J. Berg DATE: 12/22/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
 DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 4

SITE COPY - PART 3

On dock To 126KT-63 EPA 12-28-82

003685

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0333686
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 9 9 7 1 1 7
8 13

Naz Dar Company
(Company Name)
Chicago
City

1087 N Northbranch St.
Address
Illinois
State 60622
Zip

03 1 6 0 0 0 3 3 7
14 Generator Number 24
ILD 005233960

Strand Trucking
Hauler Name
Chicago
City

13642 kenton
Hauler Address
Crestwood, Ill. 60445
Hauler Address

S.W.H. Registration Number 0 0 2 4 0 0 1
25 31
ILT 000646810
S.W.H. Registration Number 32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service
(Facility Name)
Indiana
City

P.O. Box 190
Address
Indiana
State 46319
Zip

9 1 8 0 8 9 0 2
39 Site Number 46
IND 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: paint solvents

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

EPA waste No K-078

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DDT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste paint solvents Red Label
Flammable Liquid NOS 26 X 55

WEIGHT FOR D.O.T. USE 11310 (9 BS) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 0 0 1 4 3 0
47 52

(1 GALLONS) (Circle One)
(2 CU. YDS.) 1
53

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: Jan. 27, 1982

Elizabeth Rudy
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Thomas Strand-Rudin
(Authorized Signature)

DATE: 01 / 27 / 82
54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael P. Pugh
(Authorized Signature)

DATE: 1 25 82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

On dock 1/28/82 6AM
TO 126 R T-63 6AM 2/12/82

SITE COPY - PART 3

003686

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0333688

SPECIAL WASTE HAULING MANIFEST

Authorization Number ~~927117~~¹³

NAZ DAR COMPANY 1087 N. NORTHBRANCH ST.
(Company Name) Address
CHICAGO, Illinois 60622
City State Zip

312-943-8338
0316000337^G
Generator Number ²⁴
ILD 005233960

STRAND TRUCKING 13642 KENTON
Hauler Name Hauler Address
312 385-8440
CRESTWOOD, ILL. 60445
Hauler Name Hauler Address

S.W.H. Registration Number 0024002²⁵
ILT 0006466810
S.W.H. Registration Number 32³¹

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE PO BOX 190
(Facility Name) Address
INDIANA 46319
City State Zip

312-768-3400
918 08902³⁹ Site Number ⁴⁶
IND 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)
EPA Waste NO. K 078

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Paint Solvents HAZARD CLASS: RED LABEL
Waste Site FLAMMABLE LIQUID NOS 26 x 55
WEIGHT FOR D.O.T. USE 11310 (LB) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 001430
²⁶ ⁴⁷ ⁵² ⁵³

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: JULY 9, 1982
Eliz Rudy
(Authorized Signature)

U.N. 1993

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) L. Luskull DATE: 07/09/82
(Authorized Signature) ⁵⁴ ⁵⁹
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael D. Duggan DATE: 7/9/82
(Authorized Signature) ⁶⁰ ⁶⁵

COMMENTS OR SPECIAL INSTRUCTIONS:

To 125 K T-63 GPM 7.9.82

SITE COPY - PART 3

003688

STATE OF ILLINOIS

0647553
7

TO BE COMPLETED BY
WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number _____
8 13

NAZ DAR COMPANY **1087 N Northbranch St. 312-943-8338** **031 6 0 0 0337** **G**
(Company Name) Address Phone Number 14 Generator Number 24

Chicago **Illinois** **60622** **I L D 005233960**
City State Zip EPA Number

WASTE HAULER(S)

Strand Trucking **13642 Kenton** **0024002**
Hauler Name Hauler Address S.W.H. Registration Number 25 31

312-385-8440 **I L T 0006466810**
Phone Number EPA Number

Crestwood, Ill. 60445 **32**
Hauler Name Hauler Address S.W.H. Registration Number 32 38

Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service P O BOX 190 **91808902**
(Facility Name) Address 39 Site Number 46

Griffith **Indiana** **46319** **312-768-3400** **I N D 016360265**
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46

City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: **Paint Solvents** WASTE PHASE: **Liquid**
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: **Waste Paint Solvents** HAZARD CLASS: **Red Label**

U N 1 9 9 3 **K 0 7 8**
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE: **7758** LBS (Circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: **0 0 0 9 9 0** (GALLONS (Circle 0) CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS **18**) TANK TRUCK OPEN TRUCK OTHER (Specify) **Van**

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND THE P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION: *Elizabeth Rudy* DATE: **Sept 16, 1982**
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *L. Leland* DATE: **09/16/82**
(Authorized Signature) 54 59

(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO **X**

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: *Michael A. Buzg* DATE: **9/16/82**
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 - GENERATOR

To 124K T-63 GRM 9.16.82

003889

MANIFEST NUMBER
A06961

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION													
1. COMPANY NAME Milprint Inc.				2. EPA IDENTIFICATION NO. WID-000068155				3. COMMENTS/SPECIAL INSTRUCTIONS					
4. P.O. BOX OR STREET ADDRESS P.O. Box 454													
5. CITY, STATE, ZIP CODE Milwaukee, WI 53201				6. TELEPHONE NUMBER (414) 332-5800									
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)				
87-55 Gallon Drums	4785	Waste Flammable Liquid		Flammable Liquid	UB1993	1. Solid <input type="checkbox"/>	3. Mixture <input checked="" type="checkbox"/>	D001	39,150				
						1. Solid <input type="checkbox"/>	2. Liquid <input type="checkbox"/>						
						1. Solid <input type="checkbox"/>	3. Mixture <input type="checkbox"/>						
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.					15. AUTHORIZED SIGNATURE <i>[Signature]</i>				16. NAME (Print) Floyd Lynois		17. DATE SHIPPED M / D / Y 2/17/82		

TRANSPORTER SECTION			
18. COMPANY NAME Southeastern Waste Treatment, Inc.		19. EPA IDENTIFICATION NO. GA-000222083	
20. P.O. BOX OR STREET ADDRESS 1015 New South Harris Street			
21. CITY, STATE, ZIP CODE Dalton, GA 30720		22. TELEPHONE NUMBER (400) 278-0091	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>		25. NAME (Print) Charles L. Chabon	26. Date Accepted M / D / Y 12/17/82
I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical Services, Inc.		33. EPA IDENTIFICATION NO. IND-16360265	
34. P.O. BOX OR STREET ADDRESS 421 South Colfax Avenue			
35. CITY, STATE, ZIP CODE Griffth, IN		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>		39. NAME (Print) GR MURPHY	40. Date Accepted M / D / Y 12/17/82
I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME			42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE		44. NAME (Print)	45. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY

On dock 12-17-82 T. 204RT-506PM 12-30-82

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

A 104822

See reverse side, Copy 6, for instructions.
 Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION													
1. COMPANY NAME Waste Research & Reclamation Co. Inc.		2. EPA IDENTIFICATION NO. WID 990829475		3. COMMENTS/SPECIAL INSTRUCTIONS Tanker - 10009 Delivery - Wed 12/22/82 8-9AM									
4. P.O. BOX OR STREET ADDRESS Route 7													
5. CITY, STATE, ZIP CODE Eau Claire, WI 54701		6. TELEPHONE NUMBER (715) 834-9624											
7. NUMBER & TYPE OF CONTAINER 1 Tanker	8. GALLONS 5800	9. WASTE NAME Waste Flammable Liquid NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid		13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) Approx. 44,544#				
15. AUTHORIZED SIGNATURE <i>Gene H. Jameson</i>				16. NAME (Print) Gene H. Jameson		17. DATE SHIPPED M / D / Y 12 / 21 / 82							
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the U.S. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.													

TRANSPORTER SECTION			
18. COMPANY NAME Ryan Transport Corp.		19. EPA IDENTIFICATION NO. IAT 200010049	
20. P.O. BOX OR STREET ADDRESS 666 Grand Ave. P. O. Box 855			
21. CITY, STATE, ZIP CODE Des Moines, IA 50304		22. TELEPHONE NUMBER (608) 838-3108	
23. COMMENTS In Case of Emergency - Call Chemtrec 800-424-9300			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Marvin Wagner</i>	25. NAME (Print) Marvin Wagner	26. Date Accepted M / D / Y 12 / 21 / 82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical Services		33. EPA IDENTIFICATION NO. IND 016360265	
34. P.O. BOX OR STREET ADDRESS 420 S. Colfax			
35. CITY, STATE, ZIP CODE Griffith, IN 46319		36. TELEPHONE NUMBER (317) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>FDUNFEE</i>	39. NAME (Print) FDUNFEE	40. Date Accepted 12/22/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
 Department of Natural Resources
 Bureau of Solid Waste Management
 Box 8094
 Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
 In Wisconsin (608-266-3232)
 Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

*To 210 RT-50
 6PM 12-22-82*

003691

MANIFEST NUMBER
A 108297

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME Waste Research & Reclamation Co., Inc.		2. EPA IDENTIFICATION NO. WID 990829475		3. COMMENTS/SPECIAL INSTRUCTIONS Tanker - 10017 Delivery - Mon 12/20/82 8-9AM				
4. P.O. BOX OR STREET ADDRESS Route 7								
5. CITY, STATE, ZIP CODE Iau Claire, WI 54701		6. TELEPHONE NUMBER (715) 834-9624						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1 Tanker	5800	Waste Flammable Liquid NOS		Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	FO03	Approx. 44,544#
		(RQ-Toluene/Xylene)				1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Gene H. Jameson</i>		16. NAME (Print) Gene H. Jameson		17. DATE SHIPPED M / D / Y 12 / 19 / 82

TRANSPORTER SECTION		
18. COMPANY NAME Ruan Transport Corp.		19. EPA IDENTIFICATION NO. IAT 200010049
20. P.O. BOX OR STREET ADDRESS 666 Grand Ave. P. O. Box 855		
21. CITY, STATE, ZIP CODE Des Moines, IA 50304		22. TELEPHONE NUMBER (608) 838-3108
23. COMMENTS In Case of Emergency - Call Chemtrec 800-424-9300		
I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>Gene Wagner</i>	25. NAME (Print) Wagner	26. Date Accepted M / D / Y 12 / 19 / 82
I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical Services		33. EPA IDENTIFICATION NO. IND 016360265
34. P.O. BOX OR STREET ADDRESS 420 S. Colfax		
35. CITY, STATE, ZIP CODE Griffith, IN 46319		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>Gene Wagner</i>	39. NAME (Print) Wagner	40. Date Accepted M / D / Y 12 / 20 / 82
I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO: Department of Natural Resources Bureau of Solid Waste Management Box 8094 Madison, Wisconsin 53708	47. Emergency 24 Hour Assistance Telephone Number In Wisconsin (608-266-3232) Outside Wisconsin (800-424-8802)	FOR DNR USE ONLY
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HAZARDOUS WASTE FACILITY **TO 210 RT-50 GMM 12.20.82**

003672

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION																			
1. COMPANY NAME Waste Research & Reclamation Co., Inc.				2. EPA IDENTIFICATION NO. WID 990829475		3. COMMENTS/SPECIAL INSTRUCTIONS Tanker - 10015 Delivery - Tue 12/28/82 8-9AM													
4. P.O. BOX OR STREET ADDRESS Route 7																			
5. CITY, STATE, ZIP CODE Eau Claire, WI 54701				6. TELEPHONE NUMBER (715) 834-9624															
7. NUMBER & TYPE OF CONTAINER		8. GALLONS		9. WASTE NAME			10. US DOT HAZARD CLASS		11. US DOT IDENTIFICATION NUMBER		12. PHYSICAL STATE (Enter number in box)		13. US EPA WASTE CODE		14. SHIPPING WEIGHT (Pounds)				
1 Tanker		5800		Waste Flammable Liquid NOS (RQ-Toluene/Xylene)			Flammable Liquid		UN1993		1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid		FO03		Approx. 44,544#				
											1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid								
											1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid								
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.								15. AUTHORIZED SIGNATURE <i>Gene H. Jameson</i>				16. NAME (Print) Gene H. Jameson				17. DATE SHIPPED M / D / Y 12 / 28 / 82			

TRANSPORTER SECTION			
18. COMPANY NAME Ruan Transport Corp.		19. EPA IDENTIFICATION NO. IAT 200010049	
20. P.O. BOX OR STREET ADDRESS 666 Grand Ave. Box 855			
21. CITY, STATE, ZIP CODE Ies Moines, IA 50304		22. TELEPHONE NUMBER (608) 838-3108	
23. COMMENTS 17400			
I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>		25. NAME (Print) Gene H. Jameson	26. Date Accepted M / D / Y 12 / 27 / 82
I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical Services		33. EPA IDENTIFICATION NO. IND 016360265	
34. P.O. BOX OR STREET ADDRESS 420 S. Colfax			
35. CITY, STATE, ZIP CODE Griffith, IN 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>		39. NAME (Print) FOUNTEE	40. Date Accepted M / D / Y 12 / 28 / 82
I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210K
T-50 6PM 12.28.82

003693

HAZARDOUS WASTE MANIFEST

MANIFEST DOCUMENT NUMBER

SHIPPER NUMBER

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	Exempt	H&H Equipment Co. 1118 N. 1st St., Tulsa, OK 74103	11-1-82
TRANSPORTER # 1	MID 03992902	Thomas Scholt Company 2101 Pleasant Dr. Houston, TX 77058	11-1-82
TRANSPORTER # 2 (if required)		Business Chemical Services 3200 S. 17th St. Tulsa, OK 74119	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	INDO-1636065	American Chemical Company 6011 Hill Top Tulsa, OK 74119	11/7/82
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	ALTERNATE		

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
2		F005	WHITE Paint, Heavy	NA-1192	Flammable			11-96		

SPECIAL HANDLING INSTRUCTIONS

If an RO commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

PLACARDS TENDERED

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

Yes No

REMIT C.O.D. TO: ADDRESS

COD Amt: \$

C.O.D. FEE: PREPAID COLLECT \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

TOTAL CHARGES: \$

\$ _____ per _____

Signature

(Signature of Consignor)

FREIGHT CHARGES

FREIGHT PREPAID Freight is checked Check box if charges are to be correct

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE _____ 11-7-82
TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE